# CHANGE ORDER NO. 2 TO FORM OF CONTRACT

Contractor: Hogan Construction Group, LLC

Contract No. 23RFP041723K-JA, Design-Build Services for

**Fulton County Behavioral Health Crisis Center** 

Address: **5075 Avalon Ridge Parkway**City, State **Norcross, Georgia 30071** 

Telephone: (770) 242-8588

E-mail: akillen@hoganconstructiongroup.com

Contact: Adam Killen, Vice President

#### WITNESSETH

WHEREAS, Fulton County ("County") entered into a Contract with **Hogan Construction Group, LLC**, to provide/perform design-Build Services for Fulton County Behavioral Health Crisis Center, dated July 6, 2023, on behalf of the Department of Real Estate and Asset Management; and

WHEREAS, the purpose of this change order is required to make modification to the existing Contract for additional funding to cover costs for final close out the of the design and construction project of the Fulton County Behavioral Health Crisis Unit at the Oak Hill Child. Adolescent, & Family Center located at 2805 Metropolitan Parkway, SW, Atlanta, GA 30315.

WHEREAS, the Contractor has performed satisfactorily over the period of the contract; and

WHEREAS, this amendment was approved by the Fulton County Board of Commissioners on October 2, 2024, BOC Item #24-0621.

**NOW, THEREFORE**, the County and the Contractor agree as follows:

This Change Order No. 2 to Form of Contract is effective as of the 2<sup>nd</sup> day of October 2024, between the Hogan Construction Group, LLC who agree that all Services specified will be performed in accordance with this Change Order No. 2 of Form of Contract and the Contract Documents.

1. **SCOPE OF WORK TO BE PERFORMED:** Modify Scope to the existing Contract that required additional funding to cover costs for final close out that will allow the execution of 18 change directives that represents this Change Order No. 2

request which was necessary to prevent the disruption in the process and enabling the completion of the construction of the new facility to include the partial renovation of the current administrative office and other connected areas for the Fulton County Behavioral Health Crisis Unit at the Oak Hill Child. Adolescent, & Family Center.

The additional costs cover the eighteen (18) change directives are shown in the following:

Item	Description of Change Order	Amount
1	Floor Plan Modifications-Existing HVAC Replacement	\$500,023.00
	and Fire Pump Addition	
2	Revised Permanent Security Office	\$60,422.00
3	May 6th State Comments Revisions	\$44,205.00
4	Exterior Shade Sails and Fabric Awning	\$29, 507.00
5	Fulton County Network Equipment Adds	\$42,890.00
6	Addition of Exterior Lighting	\$76,350.00
7	Custom Graphics at Terrace Fence Windscreen	\$20,439.00
8	Bolting Down of Exterior Furniture	\$3,188.00
9	Additional Door Lites	\$9,569.00
10	Patient Bed Relocation (Option 2)	\$37,027.00
11	Entry Gate Security and Camera Monitoring	\$99,329.00
12	Convex Mirrors	\$21,300.00
13	Outlet Covers	\$20,066.00
14	Cup Fillers at CSU and Temp OBS	\$8,974.00
15	Add Fabric to Bottom of Fabric Awning	\$1,238.00
16	Additional Bollards at Entry Gate	\$2,848.00
17	Additional Landscaping at Fronty Entry	\$3,323.00
18	Access Control Match 2 Devices	\$16,942.00
	Total of Change Order No. 2	\$997,640.00

The completion date for the Construction Project was **September 30, 2024.** 

- 2. **COMPENSATION:** The services described under Scope of Work herein shall be performed by Contractor for a total amount not to exceed **\$997,640.00** (Nine Hundred Ninety-Seven Thousand Six Hundred Forty Dollars and Zero Cents).
- 3. **LIABILITY OF COUNTY:** This Change Order No. 2 to Form of Contract shall not become binding on the County and the County shall incur no liability upon same until such agreement has been executed by the Chair to the Commission, attested to by the Clerk to the Commission and delivered to Contractor.
- 4. **EFFECT OF CHANGE ORDER NO. 2 TO FORM OF CONTRACT:** Except as modified by this Change Order No. 2 to Form of Contract, the Contract, and all Contract Documents, remain in full force and effect.

# [INTENTIONALLY LEFT BLANK]

**IN WITNESS THEREOF**, the Parties hereto have caused this Contract to be executed by their duly authorized representatives as attested and witnessed and their corporate seals to be hereunto affixed as of the day and year date first above written.

OWNER:	CONSULTANT:
FULTON COUNTY, GEORGIA	HOGAN CONSTRUCTION GROUP, LLC
Robert L. Pitts	DocuSigned by: Paul Hogan DC980892DE9E454
Robert L. Pitts, Chairman Fulton County Board of Commissioners	Paul Hogan President
ATTEST:	ATTEST:
Docusigned by: Tonya R. Grich	
Tonya R. Grier' Chief Deputy Clerk to the Commission	Secretary/ Assistant Secretary
(Affix County Seal)	(Affix Corporate Seal)
APPROVED AS TO FORM:  DocuSigned by:	ATTEST:  DocuSigned by:
Patrick O'Connor	Abbie Tischer
Office of the County Attorney	Notary Public
APPROVED AS TO CONTENT:	County: Forsyth
Signed by:  Joseph Davis	Commission Expires: _05/23/2025
Joseph N. Davis, Director Department of Real Estate and Asset Management	(Affix Notary Seal)

ITEM#: 24-0621	_ <b>RM:</b>	REEM#: King	_ 2 <sup>nd</sup> RM:
REGULAR MEETING		REGULAR MEETIN	IG

# ACORD

# CERTIFICATE OF LIABILITY INSURANCE

**KEVERT** 

DATE (MM/DD/YYYY) 9/14/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER. AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s)

CONTACT Kyle Evert				
PHONE (A/C, No, Ext): (404) 400-3044 FAX (A/C, No):				
E-MAIL ADDRESS: kyle.evert@americanglobal.com				
INSURER(S) AFFORDING COVERAGE	NAIC #			
INSURER A: National Union Fire Insurance Co of Pitts. PA 19445				
INSURER B: The Continental Insurance Company	35289			
INSURER C: New Hampshire Insurance Company	23841			
INSURER D : Ohio Casualty Insurance Company	24074			
INSURER E : Pacific Insurance Company, Limited	10046			
INSURER F:				
	PHONE (A/C, No, Ext): (404) 400-3044  E-MAIL ADDRESS: kyle.evert@americanglobal.com  INSURER A: National Union Fire Insurance Co of Pitts. PA  INSURER B: The Continental Insurance Company INSURER C: New Hampshire Insurance Company INSURER D: Ohio Casualty Insurance Company INSURER E: Pacific Insurance Company, Limited			

COVERAGES CERTIFICATE NUMBER: **REVISION NUMBER:** 

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

	EXCLUSIONS AND CONDITIONS OF SUC						
INSI	TYPE OF INSURANCE	ADDL S	SUBR WVD POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s
A				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·····	EACH OCCURRENCE	\$ 1,000,000
	CLAIMS-MADE X OCCUR	X	989-50-05	9/1/2023	9/1/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
						MED EXP (Any one person)	\$ 10,000
						PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 2,000,000
	POLICY X PRO- JECT X LOC					PRODUCTS - COMP/OP AGG	\$ 2,000,000
	OTHER:						\$
Α	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	X ANY AUTO	X	250-78-26	9/1/2023	9/1/2024	BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
							\$
В	X UMBRELLA LIAB X OCCUR					EACH OCCURRENCE	\$ 10,000,000
	EXCESS LIAB CLAIMS-MAD	E	CUE 7040074110	8/4/2023	9/1/2024	AGGREGATE	\$ 10,000,000
	DED X RETENTION \$ 10,00	0					\$
С	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					X PER OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A	WC 048-24-0262	9/1/2023	9/1/2024	E.L. EACH ACCIDENT	\$ 1,000,000
	(Mandatory in NH)	IN/A				E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
D	Excess Liability		ECO (24) 66589334	9/1/2023	9/1/2024	Per Occurence	5,000,000
E	Professional/Poll.		20 CPI EL7984	9/1/2023	9/1/2024	Per Occurrence	2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Re: Fulton County Peachtree Library Renovation; Project #22RFP032922K-CRB

The Fulton County Board of Commissioners are named as Additional Insureds with respects to General & Automobile Liability where required by written contract.

CERTIFICATE HOLDER	CANCELLATION

**Fulton County Board of Commissioners** Central Library, One Margaret Mitchell Square Atlanta, GA 30303

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

**AUTHORIZED REPRESENTATIVE** 

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**KEVERT** 

**ACORD** 

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DATE (MM/DD/YYYY) 8/30/2023

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PRODUCER	CONTACT Kyle Evert				
American Global LLC 330 Cumberland Blvd	PHONE (A/C, No, Ext): (404) 400-3044 FAX (A/C, No):				
Guite 675	E-MAIL ADDRESS: kyle.evert@americanglobal.com				
Atlanta, GA 30339	INSURER(S) AFFORDING COVERAGE	NAIC #			
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NSURED	INSURER B: The Continental Insurance Company 35	289			
Hogan Construction Group, LLC	INSURER C: New Hampshire Insurance Company 23	841			
5075 Avalon Ridge Parkway	INSURER D : Ohio Casualty Insurance Company 24	074			
Norcross, GA 30071	INSURER E :				
	INSURER F:				

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		JSIONS AND CONDITIONS OF SUCH	ADDL							
INSR LTR		TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S	
Α	X	COMMERCIAL GENERAL LIABILITY				,	,	EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR	Х		989-50-05	9/1/2023	9/1/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000
								MED EXP (Any one person)	\$	10,000
								PERSONAL & ADV INJURY	\$	1,000,000
	GEN	I'L AGGRE <u>GAT</u> E LIMIT AP <u>PLIE</u> S PER:						GENERAL AGGREGATE	\$	2,000,000
		POLICY X PRO- JECT X LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000
		OTHER:							\$	
Α	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
	X	ANY AUTO	Х		250-78-26	9/1/2023	9/1/2024	BODILY INJURY (Per person)	\$	
		OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
	X	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
									\$	
В	X	UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$	10,000,000
		EXCESS LIAB CLAIMS-MADE			CUE 7040074110	8/4/2023	9/1/2024	AGGREGATE	\$	10,000,000
		DED X RETENTION \$ 10,000							\$	
С	WOR	KERS COMPENSATION EMPLOYERS' LIABILITY						X PER OTH- STATUTE ER		
	ANY	PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N/A		WC 048-24-0262	9/1/2023	9/1/2024	E.L. EACH ACCIDENT	\$	1,000,000
		datory in NH)	N, A					E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	DÉS	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
D	Exc	ess Liability			ECO (24) 66589334	9/1/2023	9/1/2024	Per Occurence		5,000,000
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**AUTHORIZED REPRESENTATIVE** 

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PRODUCER CONTACT Kyle Evert	
NAME: 1313 = 1311	
American Global LLC I330 Cumberland Blvd  PHONE (A/C, No, Ext): (404) 400-3044  FAX (A/C, No). Ext): (404) 400-3044	
Suite 675 E-MAIL ADDRESS: kyle.evert@americanglobal.com	
Atlanta, GA 30339 INSURER(S) AFFORDING COVERAGE	NAIC#
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NSURED INSURER B : The Continental Insurance Company 35	5289
Hogan Construction Group, LLC INSURER C: New Hampshire Insurance Company 23	3841
	1074
Norcross, GA 30071 INSURER E:	
INSURER F:	

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	OTHER:							\$	
Α	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000	0,000
	X ANY AUTO	X	Х	250-78-26	9/1/2023	9/1/2024	BODILY INJURY (Per person)	\$	
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	DED   X   RETENTION \$ 10,000							\$	
С	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						X PER OTH- STATUTE ER		
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	(Mandatory in NH)	N/A					E.L. DISEASE - EA EMPLOYEE	\$ 1,000	0,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$ 1,000	0,000
D	Excess Liability			ECO (24) 66589334	9/1/2023	9/1/2024	Per Occurence	5,000	0,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Behavioral Health Crisis Center 23RFP041723K-JA: Fulton County Government, Its Officials, Officers and Employees is included as Additional Insured in accordance with the policy provisions of the General Liability, Auto Liability and Umbrella/Excess Liability Policies. A Waiver of Subrogation is granted in favor of Fulton County Government, Its Officials, Officers and Employees in accordance with the policy provisions of the General Liability, Auto Liability, Umbrella/Excess Liability policies. A Waiver of Subrogation is granted in favor of Fulton County Government, Its Officials, Officers and Employees in accordance with the policy provisions of the Workers Compensation Policy and if permissable by law. Auto Liability, General Liability, and Umbrella Liability evidenced herein is Primary Noncontributory to other insurance available to the Additional Insureds, but only in accordance with the Policy Provisions

CERTIFICATE HOLDER	CANCELLATION

Fulton County Government – Purchasing and Contract Compliance Department 130 Peachtree Street, S.W Suite 1168 Atlanta, GA 30303 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

American Global LLC

ACORD®

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PRODUCER American Global LLC 1330 Cumberland Blvd Suite 675 Atlanta, GA 30339  NSURED  Hogan Construction Group, LLC 5075 Avalon Ridge Parkway Norcross, GA 30071		CONTACT Kyle Evert						
		PHONE (A/C, No, Ext): (404) 400-3044 FAX (A/C, No):						
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Behavioral Health Crisis Center 23RFP041723K-JA: Fulton County Government, Its Officials, Officers and Employees is included as Additional Insured in accordance with the policy provisions of the General Liability, Auto Liability and Umbrella/Excess Liability Policies. A Waiver of Subrogation is granted in favor of Fulton County Government, Its Officials, Officers and Employees in accordance with the policy provisions of the General Liability, Auto Liability, Umbrella/Excess Liability policies. A Waiver of Subrogation is granted in favor of Fulton County Government, Its Officials, Officers and Employees in accordance with the policy provisions of the Workers Compensation Policy and if permissable by law. Auto Liability, General Liability, and Umbrella Liability evidenced herein is Primary Noncontributory to other insurance available to the Additional Insureds, but only in accordance with the Policy Provisions

CERTIFICATE HOLDER	CANCELLATION

Fulton County Government – Purchasing and Contract Compliance Department 130 Peachtree Street, S.W Suite 1168 Atlanta, GA 30303 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

American	Chilad	SPE
Symeucan	Swa	220



# **EVIDENCE OF PROPERTY INSURANCE**

DATE (MM/DD/YYYY) 8/28/2023

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR P	RODUCER, AN		-	-			L A COMIN		SETWEEN THE
AGENCY PHONE (A/C, No, Ext): (404) 891-0162	CO	MPANY						-	
3330 Cumberland Blvd			Travelers Indemnity Company of America One Tower Square Hartford, CT 06183						
FAX (540) 007 4470 F-MAII info @ maring plated and									
FAX (A/C, No): (516) 387-1170 E-MAIL ADDRESS: info@americanglobal.com									
CODE: SUB CODE:									
AGENCY CUSTOMER ID #: HOGACON-02									
INSURED Hogan Construction Group, LLC 5075 Avalon Ridge Parkway Norcross, GA 30071	LO	LOAN NUMBER POLICY NUMBER QT-660-3H561958-TIA						8-TIA-23	
NOICIUSS, GA 30071		9/1/20			9/1/2024 CONTINUED UNTIL TERMINATED IF CHE			D UNTIL ED IF CHECKED	
	тні	IS REPLACES	PRIOR EVID	ENCE DA	TED:				
PROPERTY INFORMATION									
LOCATION/DESCRIPTION									
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITIEVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR NOT SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF THE PROPERTY INSURANCE MAY BE ISSUED OR NOT SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF THE PROPERTY INSURANCE MAY BE ISSUED OR NOT THE PROPERTY OR THE PROPERTY MAY BE ISSUED OR THE PROPERTY OR THE PROPERTY OR THE PROPERTY MAY BE ISSUED OR THE PROPERTY OR THE	ON OF ANY OMAY PERTAIN,	CONTRACTION THE INSUITE	T OR OTH	HER DO	OCUME Ed by 1	ENT W	TH RESPE	CT TO	) WHICH THIS ED HEREIN IS
					HAVE	BEEN	KEDUCED	BY PA	ID CLAIMS.
		ROAD	SPECIA	L		AMOU	NT OF INCURA	NCE	DEDUCTION F
COVERAGE / PERILS / FOR	MS					AMOU	NT OF INSURA	NCE	DEDUCTIBLE
Builders Risk Project Limit: New Construction (Non-Combustible, MNC) Project Limit: Renovation (Non-Combustible, MNC) Project Limit: Joisted Masonry Project Limit: Frame Construction Temporary Storage/Transit Limit Deductible							0,000		\$10,000
								$\Box$	
Remarks: Master Builders Risk Earth Movement: limits by Hazard Zone In whole or in part within a High Hazard County or Independent City and has no part within High Hazard and has no part within a High Hazard County or Independent City and has no part within High Hazard and has no part within A High Hazard County or Moderate Hazard Independent City: \$10,000,000 Per Occ./Agg. Entirely outside a High Hazard County, Moderate Hazard County or Moderate Hazard Independent City: \$10,000,000 Per Occ./Agg.									
CANCELLATION									
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES DELIVERED IN ACCORDANCE WITH THE POLICY PROVISION		ED BEFO	RE THE	EXPIR	ATION	DATE	THEREOF	, NOT	TICE WILL BE
ADDITIONAL INTEREST									
NAME AND ADDRESS		ADDITIONAL MORTGAGE	F	LEN	DER'S LC	OSS PAY	ABLE	X LOS	SS PAYEE
Fulton County Government 130 Peachtree Street, S.W.	LOAI	LOAN #							
Suite 1168 Atlanta, GA 30303	AUTI	HORIZED REI	PRESENTATI	VE					
,		American Global LLC							

AGENCY CUSTOMER ID: HOGACON-02

KEVERT

LOC #:



# ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY		NAMED INSURED
American Global LLC	Hogan Construction Group, LLC 5075 Avalon Ridge Parkway	
POLICY NUMBER	Norcross, GA 30071	
QT-660-3H561958-TIA-23		
CARRIER	NAIC CODE	
Travelers Indemnity Company of America	25666	EFFECTIVE DATE: 09/01/2023

#### **ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 27 FORM TITLE: EVIDENCE OF PROPERTY INSURANCE

Remarks:

Master Builders Risk

Remarks:

Flood: limits by Flood Zone

Flood Zone A and Flood Zone prefixed A; \$1,000,000 Per Occ./Agg.

Flood Zone B, Flood Zone X (shaded) and Flood Zone X-500: \$5,000,000 Per Occ./Agg.

Flood Zone C and Flood Zone X (unshaded): \$10,000,000 Per Occ./Agg.

\*Deductible:

**Earth Movement** 

In whole or in part within a High Hazard County \$100,000

In whole or in part within a Moderate Hazard County or Independent City and has no part within a High Hazard County: \$25,000

Flood:

Flood Zone A or Flood Zones prefixed A: \$250,000

Flood Zone B, Flood Zone X (shaded) or Flood Zone X-500: \$25,000

Flood Zone C or Flood Zone X (unshaded): \$25,000.

# **DocuSign**

#### **Certificate Of Completion**

Envelope Id: 9D595228600548A49497C2F3AC81548A Status: Completed

Subject: Please Sign Change Order No. 2 Design-Build Fulton County Behavioral Health 23RFP041723K-JA

Parcel ID:

Source Envelope:

Document Pages: 10Signatures: 6Envelope Originator:Certificate Pages: 6Initials: 0Janett L. AdamsAutoNav: EnabledStamps: 2141 Pryor Street

Envelopeld Stamping: Enabled

Time Zone: (UTC-05:00) Eastern Time (US &

Canada)

Purchasing & Contract Compliance, Suite 1168

Atlana, GA 30303

janett.adams@fultoncountyga.gov IP Address: 174.195.36.56

#### **Record Tracking**

Status: Original

10/3/2024 11:45:30 AM

Security Appliance Status: Connected

Storage Appliance Status: Connected

Holder: Janett L. Adams

janett.adams@fultoncountyga.gov

Pool: StateLocal

Pool: Fulton County Government

Location: DocuSign

Location: DocuSign

#### **Signer Events**

Adam Killen

akillen@hoganconstructiongroup.com

Security Level: Email, Account Authentication

(None)

# Signature

#### Completed

Using IP Address: 96.73.223.217

#### **Timestamp**

Sent: 10/3/2024 11:53:26 AM Viewed: 10/3/2024 12:06:01 PM Signed: 10/3/2024 12:06:10 PM

#### Electronic Record and Signature Disclosure:

Accepted: 10/3/2024 12:06:01 PM

ID: ce521aea-bfff-443c-bfcb-e31a082b3414

Paul Hogan

phogan@hoganconstructiongroup.com

President

Hogan Construction Group

Security Level: Email, Account Authentication

(None)

Docusigned by:

Paul Hogan

DC980892DE9E454...

Signature Adoption: Pre-selected Style Using IP Address: 96.73.223.217

Sent: 10/3/2024 12:06:12 PM Viewed: 10/3/2024 3:58:36 PM Signed: 10/3/2024 3:59:45 PM

Sent: 10/3/2024 3:59:46 PM

Viewed: 10/4/2024 9:34:40 AM

Signed: 10/4/2024 9:34:57 AM

#### **Electronic Record and Signature Disclosure:**

Accepted: 3/7/2019 12:22:12 PM

ID: b72197b7-5c6a-4089-b303-ea49793a5d65

Abbie Tischer

atischer@hoganconstructiongroup.com

Security Level: Email, Account Authentication

(None)

Docusigned by:

Abbic Tiscuer

A1E945B03AD5498...

### #3343753-075c-4664-b040-89902397901

Signature Adoption: Pre-selected Style Using IP Address: 96.73.223.217

# Cia

#### Electronic Record and Signature Disclosure:

Accepted: 10/4/2024 9:34:40 AM

ID: 7c75fa8b-9755-4442-bce7-4036e91a1a6e

**Signer Events Signature** Janett L. Adams Completed janett.adams@fultoncountyga.gov Assistant Purchasing Agent Using IP Address: 24.126.138.177 **Fulton County Government** Signed using mobile Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Not Offered via DocuSign Signed by: Joseph Davis Joseph Davis Joseph.Davis@fultoncountyga.gov Director Security Level: Email, Account Authentication Signature Adoption: Pre-selected Style (None) Using IP Address: 69.236.118.50 Signed using mobile **Electronic Record and Signature Disclosure:** Accepted: 10/4/2024 10:42:28 AM ID: 0814dce6-bcb8-460e-bd46-d67b35809f8f Patrick O'Connor Patrick O'Connor patrick.oconnor@fultoncountyga.gov

Security Level: Email, Account Authentication (None) Signature Adoption: Pre-selected Style Using IP Address: 74.174.59.4

**Electronic Record and Signature Disclosure:** Accepted: 10/9/2024 9:36:16 AM ID: 7388fe2c-7115-4b36-a16c-32a22a92a90f

Nikki Peterson nikki.peterson@fultoncountyga.gov Chief Deputy Clerk to the Board of Commissioners **Fulton County Government** 

Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** 

Accepted: 11/27/2017 1:39:37 PM ID: b7ce88ee-0c66-4f3a-bfee-705e0af602d8

Robert L. Pitts harriet.thomas@fultoncountyga.gov Chairman Security Level: Email, Account Authentication (None)

**Electronic Record and Signature Disclosure:** 

ID: ce2ae048-ecce-438d-863e-87e8f7940ff6

Accepted: 10/9/2024 10:44:10 AM

Tonya R. Grier tonya.grier@fultoncountyga.gov Clerk to the Commission **Fulton County** 

Security Level: Email, Account Authentication (None)

Completed

Using IP Address: 68.208.197.4

Robert L. Pitts 14F1R4AA5F6A44A

Signature Adoption: Pre-selected Style Using IP Address: 68.208.197.4

Tonya R. Grier EEC476C4837648D.

Signature Adoption: Pre-selected Style Using IP Address: 68.208.197.4

Sent: 10/4/2024 9:35:00 AM Viewed: 10/4/2024 9:36:12 AM Signed: 10/4/2024 9:36:37 AM

**Timestamp** 

Sent: 10/4/2024 9:36:40 AM Viewed: 10/4/2024 10:42:28 AM Signed: 10/4/2024 10:42:41 AM

Sent: 10/4/2024 10:42:44 AM Viewed: 10/9/2024 9:36:16 AM Signed: 10/9/2024 9:40:29 AM

Sent: 10/9/2024 9:40:33 AM Viewed: 10/9/2024 10:10:31 AM Signed: 10/9/2024 10:16:52 AM

Sent: 10/9/2024 10:16:54 AM Viewed: 10/9/2024 10:44:10 AM Signed: 10/9/2024 10:44:20 AM

Sent: 10/9/2024 10:44:22 AM Viewed: 10/9/2024 11:05:14 AM Signed: 10/9/2024 11:05:22 AM

**Signer Events Signature Timestamp Electronic Record and Signature Disclosure:** Accepted: 3/16/2018 10:54:59 AM ID: f3f241e8-3027-4447-9476-6cf20ae25dd4 Janett L. Adams Sent: 10/9/2024 11:05:26 AM Completed janett.adams@fultoncountyga.gov Viewed: 10/9/2024 12:22:46 PM Assistant Purchasing Agent Signed: 10/9/2024 12:22:53 PM Using IP Address: 74.174.59.10 **Fulton County Government** Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Not Offered via DocuSign **In Person Signer Events Signature Timestamp Editor Delivery Events Status Timestamp Agent Delivery Events Status Timestamp Intermediary Delivery Events Status Timestamp Certified Delivery Events Status** Timestamp **Carbon Copy Events Status Timestamp** Dian DeVaughn Sent: 10/9/2024 12:22:59 PM COPIED dian.devaughn@fultoncountyga.gov Security Level: Email, Account Authentication **Electronic Record and Signature Disclosure:** Not Offered via DocuSign Harry Jordan Sent: 10/9/2024 12:23:02 PM COPIED Harry.Jordan@fultoncountyga.gov Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Accepted: 10/11/2023 10:29:22 AM ID: ec358950-fb77-42fa-8eaa-e8c74aa6b034

Witness Events	Signature	Timestamp				
Notary Events	Signature	Timestamp				
Envelope Summary Events	Status	Timestamps				
Envelope Sent	Hashed/Encrypted	10/3/2024 11:53:26 AM				
Certified Delivered	Security Checked	10/9/2024 12:22:46 PM				
Signing Complete	Security Checked	10/9/2024 12:22:53 PM				
Completed	Security Checked	10/9/2024 12:23:02 PM				
Payment Events	Status	Timestamps				
Electronic Record and Signature Disclosure						

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If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

#### Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. To indicate to us that you are changing your mind, you must withdraw your consent using the DocuSign 'Withdraw Consent' form on the signing page of a DocuSign envelope instead of signing it. This will indicate to us that you have withdrawn your consent to receive required notices and disclosures electronically from us and you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

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Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

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You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: glenn.king@fultoncountyga.gov

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To let us know of a change in your e-mail address where we should send notices and disclosures electronically to you, you must send an email message to us at glenn.king@fultoncountyga.gov and in the body of such request you must state: your previous e-mail address, your new e-mail address. We do not require any other information from you to change your email address.. In addition, you must notify DocuSign, Inc. to arrange for your new email address to be reflected in your DocuSign account by following the process for changing e-mail in the DocuSign system.

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i. decline to sign a document from within your DocuSign session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may; ii. send us an e-mail to glenn.king@fultoncountyga.gov and in the body of such request you must state your e-mail, full name, US Postal Address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

#### Required hardware and software

Operating Systems:	Windows® 2000, Windows® XP, Windows
	Vista®; Mac OS® X
Browsers:	Final release versions of Internet Explorer® 6.0
	or above (Windows only); Mozilla Firefox 2.0
	or above (Windows and Mac); Safari <sup>™</sup> 3.0 or
	above (Mac only)
PDF Reader:	Acrobat® or similar software may be required
	to view and print PDF files
Screen Resolution:	800 x 600 minimum
Enabled Security Settings:	Allow per session cookies
_	

<sup>\*\*</sup> These minimum requirements are subject to change. If these requirements change, you will be asked to re-accept the disclosure. Pre-release (e.g. beta) versions of operating systems and browsers are not supported.

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To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please verify that you were

able to read this electronic disclosure and that you also were able to print on paper or electronically save this page for your future reference and access or that you were able to e-mail this disclosure and consent to an address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format on the terms and conditions described above, please let us know by clicking the 'I agree' button below.

By checking the 'I agree' box, I confirm that:

- I can access and read this Electronic CONSENT TO ELECTRONIC RECEIPT OF ELECTRONIC CONSUMER DISCLOSURES document; and
- I can print on paper the disclosure or save or send the disclosure to a place where I can print it, for future reference and access; and
- Until or unless I notify Carahsoft OBO Fulton County, Georgia as described above, I
  consent to receive from exclusively through electronic means all notices, disclosures,
  authorizations, acknowledgements, and other documents that are required to be provided
  or made available to me by Carahsoft OBO Fulton County, Georgia during the course of
  my relationship with you.