

DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

CONTRACT RENEWAL AGREEMENT

DEPARTMENT: Senior Services

BID/RFP NUMBER: 23ITB125742A-BKJ

BID/RFP TITLE: Pool Maintenance and Repair

ORIGINAL APPROVAL DATE: March 20, 2024

RENEWAL EFFECTIVE DATES: January 1, 2026 - December 31, 2026

RENEWAL OPTION #: 2 OF 2

NUMBER OF RENEWAL OPTIONS: 2

RENEWAL AMOUNT: \$228,924.00

COMPANY'S NAME: United Pool Maintenance of Georgia, LLC

ADDRESS: 1245 Alpharetta St

CITY: Roswell

STATE: GA

ZIP: 30075

This Renewal Agreement No. $\underline{2}$ was approved by the Fulton County Board of

Commissioners on BOC DATE: 10/1/2025 BOC NUMBER: 25-0744

CERTIFICATE OF INSURANCE: The Contractor is required to maintain insurance during the entire term of this Agreement, including any contract renewals. Upon request, the Contractor/Vendor must furnish the County a Certificate of Insurance showing the required coverage as specified in the Contract Agreement and any renewals. A current COI must be provided before the commencement of work on this project under this Contract Renewal. The cancellation of any policy of insurance required by this Agreement shall meet the requirements of notice under the laws of the State of Georgia as presently set forth in the Georgia Code.

SIGNATURES: SEE NEXT PAGE

SIGNATURES:

Contractor agrees to accept the renewal option and abide by the terms and conditions set forth in the contract and specifications as referenced herein:

FULTON COUNTY, GEORGIA
Robert L. Pitts
Robert L. Pitts, Chairman Fulton County Board of Commissioners
ATTEST:
Signed by: Tanjak Frui
Tonya R. Grier Clerk to the Commission
(Affix County Seal)
AUTHORIZATION OF RENEWAL:
DocuSigned by: Ladisa Onyiliogwu
Ladisa Onyiliogwu, Director Department of Senior Services

Certificate of Insurance

UNITED POOL MAINTENANCE OF GEORGIA,

—Docusigned by: Brad Passaur

Brad Nassaur Vice President

x RM SRM

ITEM#: 25-0744 RM: 10/01/20	25 ITEM#:_xxx	2 nd RM:xxx
REGULAR MEETING	SECOND REG	ULAR MEETING

CERTIFICATE OF INSURANCE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/16/2025

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 BELOW. 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).

PRODUCER Yates, LLC		CONTACT NAME: PHONE			
2800 Century Parkway NE Suite 300		PHONE (A/C, No, Ext): 404-633-4321 E-MAIL ADDRESS: certs@yatesins.com	FAX (A/C, No): 404-63	3-1312	
Atlanta GA 30345		INSURER(S) AFFORDING COVERAGE		NAIC#	
		INSURER A: Technology Insurance Company, Inc.		42376	
United Pools Management of America, LLC United Pool Maintenance LLC, United Pool 7421 Douglas Blvd Suite N-213 Douglasville GA 30135	UNITPO02-C	INSURER B: Berkley Specialty Insurance Company 3		31295	
	nerica, LLC Inited Pool Construction LLC	INSURER C: Firemen's Insurance Company of Washington, D.C.		21784	
		INSURER D: Canopius US Insurance, Inc		12961	
		INSURER E :			
		INSURER F:			
COVERAGES	CERTIFICATE NUMBER: 1547184362	REVISION NUM	MBER:		

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.

INSR LTR		TYPE OF INSURANCE	ADDL INSD		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMIT	 S
В	Х	COMMERCIAL GENERAL LIABILITY	INSD	VVVD	CGL0235793-21	9/15/2025	9/15/2026	EACH OCCURRENCE	\$ 1,000,000
		CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
								MED EXP (Any one person)	\$
								PERSONAL & ADV INJURY	\$ 1,000,000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000
	Х	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000
		OTHER:							\$
С	AUT	OMOBILE LIABILITY			CNA4553570	9/15/2025	9/15/2026	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
		ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED X SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	Х	HIRED X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
									\$
D		UMBRELLA LIAB X OCCUR			CUSUXS6000115	9/15/2025	9/15/2026	EACH OCCURRENCE	\$ 2,000,000
	Х	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 2,000,000
		DED X RETENTION \$ 0							\$
Α		KERS COMPENSATION EMPLOYERS' LIABILITY			TWC4474658	9/15/2025	9/15/2026	X PER OTH- STATUTE ER	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$ 1,000,000
	(Man	datory in NH)						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
	DES	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Subject to policy terms, conditions, forms and exclusions, the insurance coverage's afforded by the policies above include the following when required by written contract for the certificate holder and/or entities listed below: Blanket Additional Insured in regards to General Liability and Automobile Liability. Blanket Primary and Non-contributory in regards to General Liability and Automobile Liability. Blanket Waiver of Subrogation in regards to General Liability and Automobile Liability. Excess Liability is Follow Form.

L807 10/19 Additional Insured – Primary and Noncontributory – Automatic Status when Required In a Written Contract or Agreement (including Completed See Attached...

CERTIFICATE HOLDER	CANCELLATION
	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 White the second

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Certificate Of Completion

Envelope Id: 16112E3A-9DF3-464C-9033-002649B029A9

Subject: 23ITB125742A-BKJ, Pool Maintenance and Repair - United Pool Maintenance, LLC (Renewal 2)

Parcel ID:

Employee Name: Source Envelope:

Document Pages: 4 Certificate Pages: 6 AutoNav: Enabled

Envelopeld Stamping: Enabled

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

Canada)

Signatures: 4 Initials: 0

Stamps: 1

Envelope Originator:

Status: Completed

Brian Jones 141 Pryor Street

Purchasing & Contract Compliance, Suite 1168

Atlana, GA 30303

brian.jones@fultoncountyga.gov IP Address: 134.231.232.249

Record Tracking

Status: Original

10/6/2025 10:58:01 PM

Security Appliance Status: Connected

Storage Appliance Status: Connected

Holder: Brian Jones

brian.jones@fultoncountyga.gov

Pool: StateLocal

Pool: Fulton County Government

Location: DocuSign

Location: Docusign

Signer Events

Brad Nassaur

brad@unitedpools.com

Vice President

United Pools Security Level: Email, Account Authentication

(None)

Signature

Brad Nassaur 3D0852140FBE4B7.

Signature Adoption: Pre-selected Style

Using IP Address: 73.7.248.5

Timestamp

Sent: 10/6/2025 11:11:04 PM Viewed: 10/7/2025 5:50:13 PM Signed: 10/10/2025 9:35:58 AM

Electronic Record and Signature Disclosure:

Accepted: 3/28/2024 3:35:35 PM

ID: 60370e04-0067-4464-875a-0e1dc52e9fcd

Ladisa Onyiliogwu

Ladisa.Onyiliogwu@fultoncountyga.gov Security Level: Email, Account Authentication

(None)

Ladisa Onyiliogwu F58283B77B1A4C2...

Signature Adoption: Pre-selected Style Using IP Address: 172.56.71.149

Sent: 10/10/2025 9:35:59 AM Viewed: 10/10/2025 11:28:54 AM Signed: 10/10/2025 11:29:05 AM

Electronic Record and Signature Disclosure:

Not Offered via Docusign

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 **Fulton County**

Security Level: Email, Account Authentication

(None)

Completed

Using IP Address: 68.208.197.4

Sent: 10/10/2025 11:29:07 AM Viewed: 10/13/2025 10:30:03 AM

Signed: 10/13/2025 10:31:47 AM

Robert L. Pitts 14E1B4AA5F6A44A.

Signature Adoption: Pre-selected Style Using IP Address: 74.174.59.10

Sent: 10/13/2025 10:31:48 AM Viewed: 10/13/2025 11:17:29 AM Signed: 10/13/2025 11:17:39 AM

Signer Events Signature Timestamp

Electronic Record and Signature Disclosure: Accepted: 10/13/2025 11:17:29 AM

ID: 2b474fe0-0032-4f94-a4f7-e071b2a3a1e1
Tonya Grier

tonya.grier@fultoncountyga.gov Clerk to the Commission Fulton County Government

Security Level: Email, Account Authentication

(None)

Signed by:

Derigal France
EEC476C4837648D...

Sent: 10/13/2025 11:17:40 AM Viewed: 10/13/2025 11:18:47 AM Signed: 10/13/2025 11:19:00 AM

Signature Adoption: Uploaded Signature Image

Using IP Address: 2600:387:f:68::4

Signed using mobile

Electronic Record and Signature Disclosure:

Accepted: 3/16/2018 10:54:59 AM ID: f3f241e8-3027-4447-9476-6cf20ae25dd4

Brian Jones

brian.jones@fultoncountyga.gov

President-Elect

Fulton County Government

Security Level: Email, Account Authentication

(None)

Electronic Record and Signature Disclosure:

Not Offered via Docusign

Completed

Using IP Address: 74.174.59.4

Sent: 10/13/2025 11:19:02 AM Viewed: 10/13/2025 12:30:10 PM Signed: 10/13/2025 12:30:18 PM

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 Dian.DeVaughn@fultoncountyga.gov	COPIED	Sent: 10/13/2025 12:30:20 PM Viewed: 10/13/2025 2:03:00 PM

Dian DeVaughn
Dian.DeVaughn@fultoncountyga.gov
Security Level: Email, Account Authentication
(None)

Electronic Record and Signature Disclosure:

Not Offered via Docusign

Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	10/6/2025 11:11:04 PM
Envelope Updated	Security Checked	10/9/2025 2:48:41 PM
Envelope Updated	Security Checked	10/9/2025 2:48:41 PM
Envelope Updated	Security Checked	10/9/2025 2:48:41 PM
Envelope Updated	Security Checked	10/9/2025 2:48:41 PM
Envelope Updated	Security Checked	10/9/2025 2:48:41 PM
Envelope Updated	Security Checked	10/9/2025 2:48:41 PM
Envelope Updated	Security Checked	10/9/2025 2:48:41 PM

Envelope Summary Events	Status	Timestamps		
Certified Delivered	Security Checked	10/13/2025 12:30:10 PM		
Signing Complete	Security Checked	10/13/2025 12:30:18 PM		
Completed	Security Checked	10/13/2025 12:30:20 PM		
Payment Events	Status	Timestamps		
Electronic Record and Signature Disclosure				

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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

To advise Carahsoft OBO Fulton County, Georgia of your new e-mail address

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 [™] 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
	-

^{**} 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.

Acknowledging your access and consent to receive materials electronically

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.

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- 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.