



## CONTRACT RENEWAL AGREEMENT

**DEPARTMENT:** Public Works

**BID/RFP# NUMBER:** 23ITB137397A-KM

**BID/RFP# TITLE:** Sewer System Cleaning and Manhole Camera Inspection Services

**ORIGINAL APPROVAL DATE:** May 17, 2023

**RENEWAL EFFECTIVE DATES:** January 1, 2025 through December 31, 2025

**RENEWAL OPTION #:** 2 of 2

**NUMBER OF RENEWAL OPTIONS:** no renewal option

**RENEWAL AMOUNT:** \$550,000.00

**COMPANY'S NAME:** Woolpert, Inc.

**ADDRESS:** 375 Northridge Road, Suite 300

**CITY:** Atlanta

**STATE:** GA

**ZIP:** 30350

**This Renewal Agreement No. 2 was approved by the Fulton County Board of**

**Commissioners on BOC DATE:** 11/6/2024 **BOC NUMBER:** 24-0735

**CERTIFICATE OF INSURANCE:** The Contractor/Vendor 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:**

**Vendor 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**

Signed by:

*Robert L. Pitts*

**Robert L. Pitts, Chairman  
Fulton County Board of Commissioners**

**ATTEST:**

DocuSigned by:

*Tonya R. Grier*

**Tonya R. Grier  
Clerk to the Commission**

**(Affix County Seal)**

**AUTHORIZATION OF RENEWAL:**

DocuSigned by:

*David Clark*

**David Clark, Director  
Department of Public Works**

**WOOLPERT, INC.**

DocuSigned by:

*K. Flint Holbrook*

**K. Flint Holbrook  
Senior Vice President**

**ATTEST:** Woolpert was organized under the laws of the State of Ohio, which do not require a seal for the creation of a corporation. As a result, Woolpert does not have a corporate seal.

*Eric M. Donald*

**Secretary/  
Assistant Secretary**

**(Affix Corporate Seal)**

**ATTEST:**

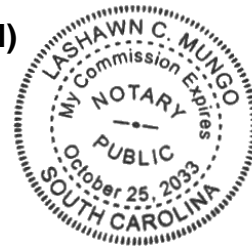
*J. Mungo*

**Notary Public**

**County:** Lancaster

**Commission Expires:** 10/25/33

**(Affix Notary Seal)**



**ITEM#:** 24-0735

**RM:** 11/6/24 1st

**REGULAR MEETING**

**ITEM#:** Re-Meeting

**2<sup>ND</sup> RM:**

**SECOND REGULAR MEETING**



# CERTIFICATE OF LIABILITY INSURANCE

 DATE(MM/DD/YYYY)  
03/01/2024

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).

| <b>PRODUCER</b><br>Aon Risk Services Northeast, Inc.<br>New York NY Office<br>One Liberty Plaza<br>165 Broadway, Suite 3201<br>New York NY 10006 USA | <b>CONTACT NAME:</b><br>PHONE (A/C. No. Ext): (866) 283-7122 FAX (A/C. No.): (800) 363-0105<br>E-MAIL ADDRESS:  |                               |        |  |       |  |       |  |       |   |       |   |       |   |       |
|--|---|-------------------------------|--------|--|-------|--|-------|--|-------|---|-------|---|-------|---|-------|
| <b>INSURED</b><br>Woolpert Inc.<br>4454 Idea Center Boulevard<br>Dayton OH 45430 USA   | <table border="1"> <thead> <tr> <th data-bbox="803 514 1388 535">INSURER(S) AFFORDING COVERAGE</th> <th data-bbox="1388 514 1520 535">NAIC #</th> </tr> </thead> <tbody> <tr> <td data-bbox="803 535 1388 556">INSURER A: Underwriters At Lloyds London</td> <td data-bbox="1388 535 1520 556">15792</td> </tr> <tr> <td data-bbox="803 556 1388 577">INSURER B: The Phoenix Insurance Company</td> <td data-bbox="1388 556 1520 577">25623</td> </tr> <tr> <td data-bbox="803 577 1388 598">INSURER C: The Travelers Indemnity Co.</td> <td data-bbox="1388 577 1520 598">25658</td> </tr> <tr> <td data-bbox="803 598 1388 619">INSURER D: The Charter Oak Fire Insurance Company</td> <td data-bbox="1388 598 1520 619">25615</td> </tr> <tr> <td data-bbox="803 619 1388 640">INSURER E: Travelers Property Cas Co of America</td> <td data-bbox="1388 619 1520 640">25674</td> </tr> <tr> <td data-bbox="803 640 1388 688">INSURER F: Endurance American Specialty Ins Co.</td> <td data-bbox="1388 640 1520 688">41718</td> </tr> </tbody> </table> | INSURER(S) AFFORDING COVERAGE | NAIC # | INSURER A: Underwriters At Lloyds London | 15792 | INSURER B: The Phoenix Insurance Company | 25623 | INSURER C: The Travelers Indemnity Co. | 25658 | INSURER D: The Charter Oak Fire Insurance Company | 25615 | INSURER E: Travelers Property Cas Co of America | 25674 | INSURER F: Endurance American Specialty Ins Co. | 41718 |
| INSURER(S) AFFORDING COVERAGE  | NAIC #  |                               |        |  |       |  |       |  |       |   |       |   |       |   |       |
| INSURER A: Underwriters At Lloyds London   | 15792   |                               |        |  |       |  |       |  |       |   |       |   |       |   |       |
| INSURER B: The Phoenix Insurance Company   | 25623   |                               |        |  |       |  |       |  |       |   |       |   |       |   |       |
| INSURER C: The Travelers Indemnity Co.   | 25658   |                               |        |  |       |  |       |  |       |   |       |   |       |   |       |
| INSURER D: The Charter Oak Fire Insurance Company  | 25615   |                               |        |  |       |  |       |  |       |   |       |   |       |   |       |
| INSURER E: Travelers Property Cas Co of America  | 25674   |                               |        |  |       |  |       |  |       |   |       |   |       |   |       |
| INSURER F: Endurance American Specialty Ins Co.  | 41718   |                               |        |  |       |  |       |  |       |   |       |   |       |   |       |

## COVERAGES

CERTIFICATE NUMBER: 570104160990

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. **Limits shown are as requested**


| INSR LTR | TYPE OF INSURANCE   | ADDL INSD | SUBR WVD | POLICY NUMBER                            | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS  |
|----------|---|-----------|----------|--|-------------------------|-------------------------|---|
| D        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC<br>OTHER: |           |          | P6300R561380COF24                        | 03/01/2024              | 03/01/2025              | EACH OCCURRENCE \$1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000<br>MED EXP (Any one person) \$15,000<br>PERSONAL & ADV INJURY \$1,000,000<br>GENERAL AGGREGATE \$2,000,000<br>PRODUCTS - COMP/OP AGG \$2,000,000 |
| B        | <b>AUTOMOBILE LIABILITY</b><br><input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY<br><input type="checkbox"/> HIRED AUTOS ONLY  |           |          | 810-2W206561-24-43-G                     | 03/01/2024              | 03/01/2025              | COMBINED SINGLE LIMIT (Ea accident) \$1,000,000<br>BODILY INJURY (Per person)<br>BODILY INJURY (Per accident)<br>PROPERTY DAMAGE (Per accident)   |
| E        | <input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br>DED <input checked="" type="checkbox"/> RETENTION \$10,000   |           |          | CUP2W73426524NF                          | 03/01/2024              | 03/01/2025              | EACH OCCURRENCE \$10,000,000<br>AGGREGATE \$10,000,000  |
| C        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below   | Y/N<br>N  | N/A      | UB4W7689952443E                          | 03/01/2024              | 03/01/2025              | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER<br>E.L. EACH ACCIDENT \$1,000,000<br>E.L. DISEASE-EA EMPLOYEE \$1,000,000<br>E.L. DISEASE-POLICY LIMIT \$1,000,000                                     |
| A        | <b>E&amp;O - Professional Liability</b><br>- Primary  |           |          | PSDEF2401124<br>Clms Md - Prof/Pollution | 03/01/2024              | 03/01/2025              | Per Claim/Aggregate Deductible \$5,000,000<br>\$750,000   |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate Holder is included as Additional Insured in accordance with the policy provisions of the General Liability and Automobile Liability policies. A waiver of Subrogation is granted in favor of Additional insureds in accordance with the policy provisions of the General Liability and Automobile Liability policies. Should any of the above described policies be cancelled before the expiration date thereof, the policy provisions will govern how notice of cancellation may be delivered to certificate holders in accordance with the policy provisions of each policy.

## CERTIFICATE HOLDER

## CANCELLATION

|  |   |
|--|---|
| Fulton County Government<br>Purchasing and Contract Compliance Dept.<br>130 Peachtree St., S.W., Suite 1168<br>Atlanta GA 30303-3459 USA | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br>AUTHORIZED REPRESENTATIVE<br> |
|--|---|

Holder Identifier :

Certificate No : 570104160990



LOC #:

ADDITIONAL REMARKS SCHEDULE

|   |           |                                |
|---|-----------|--------------------------------|
| AGENCY<br>Aon Risk Services Northeast, Inc.           |           | NAMED INSURED<br>Woolpert Inc. |
| POLICY NUMBER<br>See Certificate Number: 570104160990 |           |                                |
| CARRIER<br>See Certificate Number: 570104160990       | NAIC CODE | EFFECTIVE DATE:                |

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: ACORD 25    FORM TITLE: Certificate of Liability Insurance

| INSURER(S) AFFORDING COVERAGE | NAIC # |
|-------------------------------|--------|
| INSURER                       |        |
| INSURER                       |        |
| INSURER                       |        |
| INSURER                       |        |

**ADDITIONAL POLICIES**    If a policy below does not include limit information, refer to the corresponding policy on the ACORD certificate form for policy limits.

| INSR LTR | TYPE OF INSURANCE | ADDL INSD | SUBR WVD | POLICY NUMBER  | POLICY EFFECTIVE DATE (MM/DD/YYYY) | POLICY EXPIRATION DATE (MM/DD/YYYY) | LIMITS           |             |
|----------|-------------------|-----------|----------|--|------------------------------------|-------------------------------------|------------------|-------------|
|          | OTHER             |           |          |  |                                    |                                     |                  |             |
| F        | Cyber Liability   |           |          | PRO30033076101<br>Claims Made<br>SIR applies per policy terms & conditions | 03/01/2024                         | 03/01/2025                          | Per Claim/Aggreg | \$5,000,000 |
|          |                   |           |          |  |                                    |                                     | SIR              | \$100,000   |
|          |                   |           |          |  |                                    |                                     |                  |             |
|          |                   |           |          |  |                                    |                                     |                  |             |
|          |                   |           |          |  |                                    |                                     |                  |             |
|          |                   |           |          |  |                                    |                                     |                  |             |
|          |                   |           |          |  |                                    |                                     |                  |             |
|          |                   |           |          |  |                                    |                                     |                  |             |
|          |                   |           |          |  |                                    |                                     |                  |             |
|          |                   |           |          |  |                                    |                                     |                  |             |
|          |                   |           |          |  |                                    |                                     |                  |             |
|          |                   |           |          |  |                                    |                                     |                  |             |
|          |                   |           |          |  |                                    |                                     |                  |             |

Certificate Of Completion

|   |               |  |
|---|---------------|--|
| Envelope Id: F745C077024F4857B216CCF592A54E1A     |               | Status: Completed                            |
| Subject: 23ITB137397A-KM, Woolpert                |               |  |
| Parcel ID:  |               |  |
| Employee Name:                                    |               |  |
| Source Envelope:                                  |               |  |
| Document Pages: 4                                 | Signatures: 3 | Envelope Originator:                         |
| Certificate Pages: 6                              | Initials: 0   | Keisha Massey                                |
| AutoNav: Enabled                                  |               | 141 Pryor Street                             |
| Envelopeld Stamping: Enabled                      |               | Purchasing & Contract Compliance, Suite 1168 |
| Time Zone: (UTC-05:00) Eastern Time (US & Canada) |               | Atlanta, GA 30303                            |
|   |               | keisha.massey@fultoncountyga.gov             |
|   |               | IP Address: 74.174.59.4                      |

Record Tracking

|                                      |                                  |                    |
|--------------------------------------|----------------------------------|--------------------|
| Status: Original                     | Holder: Keisha Massey            | Location: DocuSign |
| 11/12/2024 10:14:30 AM               | keisha.massey@fultoncountyga.gov |                    |
| Security Appliance Status: Connected | Pool: StateLocal                 |                    |
| Storage Appliance Status: Connected  | Pool: Fulton County Government   | Location: DocuSign |

| Signer Events  | Signature   | Timestamp                      |
|--|---|--------------------------------|
| David Clark  | <div>DocuSigned by:<br/><i>David Clark</i><br/>65CE1C9FDD834B8...</div> | Sent: 11/12/2024 10:19:09 AM   |
| david.clark@fultoncountyga.gov                       |   | Viewed: 11/12/2024 10:20:59 AM |
| Director   |   | Signed: 11/12/2024 10:21:06 AM |
| Public Works   |   |                                |
| Security Level: Email, Account Authentication (None) | Signature Adoption: Pre-selected Style                                  |                                |
|  | Using IP Address: 136.179.21.64   |                                |

Electronic Record and Signature Disclosure:  
Accepted: 11/13/2017 1:07:14 PM  
ID: 62e0a41e-60ea-4640-a1cb-69bfc2cfa732

Nikki Peterson  
nikki.peterson@fultoncountyga.gov  
Chief Deputy Clerk to the Board of Commissioners  
Fulton County Government  
Security Level: Email, Account Authentication (None)

Completed  
Using IP Address: 68.208.197.4

Sent: 11/12/2024 10:21:08 AM  
Viewed: 11/12/2024 1:29:12 PM  
Signed: 11/12/2024 1:31:32 PM

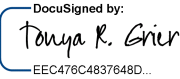
Electronic Record and Signature Disclosure:  
Accepted: 11/27/2017 1:39:37 PM  
ID: b7ce88ee-0c66-4f3a-bfee-705e0af602d8

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

Signed by:  
*Robert L. Pitts*  
14E1B4AA5F6A44A...  
Signature Adoption: Pre-selected Style  
Using IP Address: 68.208.197.4

Sent: 11/12/2024 1:31:33 PM  
Viewed: 11/12/2024 1:34:14 PM  
Signed: 11/12/2024 3:05:28 PM

Electronic Record and Signature Disclosure:  
Accepted: 11/12/2024 3:05:13 PM  
ID: 9a261554-42a1-49d7-9bb4-e87faa0657c0

| Signer Events  | Signature  | Timestamp   |
|--|--|---|
| Tonya R. Grier<br>tonya.grier@fultoncountyga.gov<br>Clerk to the Commission<br>Fulton County<br>Security Level: Email, Account Authentication (None) |  <p>DocuSigned by:<br/>Tonya R. Grier<br/>EEC476C4837648D...</p> <p>Signature Adoption: Pre-selected Style<br/>Using IP Address: 68.208.197.4</p> | Sent: 11/12/2024 3:05:29 PM<br>Viewed: 11/12/2024 3:34:42 PM<br>Signed: 11/12/2024 3:34:49 PM |

**Electronic Record and Signature Disclosure:**  
 Accepted: 3/16/2018 10:54:59 AM  
 ID: f3f241e8-3027-4447-9476-6cf20ae25dd4

| 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 |

|   |                   |  |
|---|-------------------|--|
| Keisha Massey<br>keisha.massey@fultoncountyga.gov<br>Procurement Offier<br>Cintas Corporation<br>Security Level: Email, Account Authentication (None) | <div>COPIED</div> | Sent: 11/12/2024 3:34:50 PM<br>Resent: 11/12/2024 3:35:01 PM |
| <b>Electronic Record and Signature Disclosure:</b><br>Not Offered via DocuSign  |                   |  |
| Andrenette Whitlow<br>andrenette.whitlow@fultoncountyga.gov<br>Security Level: Email, Account Authentication (None)                                   | <div>COPIED</div> | Sent: 11/12/2024 3:34:51 PM<br>Viewed: 11/12/2024 6:18:11 PM |
| <b>Electronic Record and Signature Disclosure:</b><br>Accepted: 3/9/2023 3:21:00 PM<br>ID: ad58dfa7-b842-4576-bfdc-d4bd40584d8f                       |                   |  |
| Shandha Read<br>shandha.read@fultoncountyga.gov<br>Security Level: Email, Account Authentication (None)   | <div>COPIED</div> | Sent: 11/12/2024 3:34:53 PM<br>Viewed: 11/12/2024 8:36:21 PM |
| <b>Electronic Record and Signature Disclosure:</b><br>Not Offered via DocuSign  |                   |  |
| Dian DeVaughn<br>Dian.DeVaughn@fultoncountyga.gov<br>Security Level: Email, Account Authentication (None)   | <div>COPIED</div> | Sent: 11/12/2024 3:34:54 PM<br>Viewed: 11/12/2024 4:43:13 PM |
| <b>Electronic Record and Signature Disclosure:</b><br>Not Offered via DocuSign  |                   |  |
| Brian Jones<br>brian.jones@fultoncountyga.gov<br>President-Elect<br>Fulton County Government<br>Security Level: Email, Account Authentication (None)  | <div>COPIED</div> | Sent: 11/12/2024 3:34:55 PM<br>Viewed: 11/12/2024 6:29:41 PM |
| <b>Electronic Record and Signature Disclosure:</b><br>Not Offered via DocuSign  |                   |  |

| Witness Events                             | Signature        | Timestamp              |
|--|------------------|------------------------|
| Notary Events                              | Signature        | Timestamp              |
| Envelope Summary Events                    | Status           | Timestamps             |
| Envelope Sent                              | Hashed/Encrypted | 11/12/2024 10:19:09 AM |
| Envelope Updated                           | Security Checked | 11/12/2024 10:23:32 AM |
| Certified Delivered                        | Security Checked | 11/12/2024 3:34:42 PM  |
| Signing Complete                           | Security Checked | 11/12/2024 3:34:49 PM  |
| Completed                                  | Security Checked | 11/12/2024 3:34:55 PM  |
| Payment Events                             | Status           | Timestamps             |
| Electronic Record and Signature Disclosure |                  |                        |

## **CONSUMER DISCLOSURE**

From time to time, Carahsoft OBO Fulton County, Georgia (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign, Inc. (DocuSign) electronic signing system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to these terms and conditions, please confirm your agreement by clicking the 'I agree' button at the bottom of this document.

### **Getting paper copies**

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after signing session and, if you elect to create a DocuSign signer account, you may access them for a limited period of time (usually 30 days) after such documents are first sent to you. You may request delivery of such paper copies from us by following the procedure described below.

### **Withdrawing your consent**

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.

### **All notices and disclosures will be sent to you electronically**

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.

### **How to contact Carahsoft OBO Fulton County, Georgia:**



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](mailto: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](mailto: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.

**To request paper copies from Carahsoft OBO Fulton County, Georgia**

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an e-mail to [glenn.king@fultoncountyga.gov](mailto:glenn.king@fultoncountyga.gov) and in the body of such request you must state your e-mail address, full name, US Postal address, and telephone number. We will bill you for any fees at that time, if any.

**To withdraw your consent with Carahsoft OBO Fulton County, Georgia**

To inform us that you no longer want to receive future notices and disclosures in electronic format you may:

- 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](mailto: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.

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.