

DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

CONTRACT RENEWAL AGREEMENT

DEPARTMENT: Public Works

BID/RFP NUMBER: 22ITBC074A-JWT

BID/RFP TITLE: Corporate Stops and Brass Fittings

ORIGINAL APPROVAL DATE: December 21, 2022

RENEWAL EFFECTIVE DATES: January 1, 2025

RENEWAL OPTION #: 2 OF 2

NUMBER OF RENEWAL OPTIONS: Zero renewal options remain

RENEWAL AMOUNT: \$412,683.51

COMPANY'S NAME: Delta Municipal Supply Company

ADDRESS: 408 Jesse Chronic Road

CITY: Braselton

STATE: GA

ZIP: 30517

This Renewal Agreement No. 2 was approved by the Fulton County Board of Commissioners on BOC DATE: October 2, 2024 BOC NUMBER: 24-0644

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:

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

Delta Municipal Supply Company
DocuSigned by:
Share Slocum
Shane Slocum
Vice President
ATTEST:
DocuSigned by:
Shane Slocum
Secretary/
Assistarit Secretary
STAND OF THE PROPERTY OF THE P
(Afficient orate Seal)
ATTEST:
Notary Public
County:
Commission Expires:
(Affix Notary Seal)
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ITEM#:	_ RCS:	ITEM#:	RM:
REGULAR MEETING		SECOND REG	ULAR MEETING

CERTIFICATE OF INSURANCE





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/08/2024

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) CONTACT NAME: Julie Taylor (706) 543-2575 FAX (A/C, No): Chastain & Associates Ins PHONE (706) 543-4847 (A/C, No, Ext): P.O. Box 1908 jtaylor@chastain-assoc.com ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC# GA 30603 Athens Cincinnati Insurance Company INSURER A: INSURED INSURER B : Delta Municipal Supply Company INSURER C: P.O BOX 936 INSURER D : INSURER E : Braselton GA 30517 INSURER F COVERAGES **CERTIFICATE NUMBER:** CL245343268 **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. ADDL SUBR POLICY EFF (MM/DD/YYYY) POLICY EXP (MM/DD/YYYY) INSR LTR TYPE OF INSURANCE POLICY NUMBER COMMERCIAL GENERAL LIABILITY 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED CLAIMS-MADE | X OCCUR 500,000 PREMISES (Ea occurrence) 10,000 MED EXP (Any one person) EPP0076563 05/01/2024 05/01/2025 1,000,000 Α PERSONAL & ADV INJURY 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE 2,000,000 POLICY LOC PRODUCTS - COMP/OP AGG \$ Data Defender \$ 50,000 OTHER: COMBINED SINGLE LIMIT (Ea accident) 1,000,000 AUTOMOBILE LIABILITY \$ ANY AUTO BODILY INJURY (Per person) OWNED SCHEDULED AUTOS ONLY HIRED EBA0076563 05/01/2024 05/01/2025 BODILY INJURY (Per accident) \$ AUTOS NON-OWNED PROPERTY DAMAGE \$ AUTOS ONLY AUTOS ONLY \$ UMBRELLA LIAB 3,000,000 OCCUR EACH OCCURRENCE **EXCESS LIAB** EPP0076563 05/01/2024 05/01/2025 3,000,000 CLAIMS-MADE AGGREGATE 10.000 DED | RETENTION \$ \$ WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY 1,000,000 ANY PROPRIETOR/PARTNER/EXECUTIVE E.L. EACH ACCIDENT Ф EWC0316937 05/01/2025 N/A 05/01/2024 OFFICER/MEMBER EXCLUDED? 1,000,000 (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE If yes, describe under DESCRIPTION OF OPERATIONS below 1,000,000 E.L. DISEASE - POLICY LIMIT Load Unload/ Per Conveyanc/\$150,000 Motor Truck Cargo EPP0076563 05/01/2024 05/01/2025 Coverage/\$150,000 Deduct/ DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) 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. Fulton County Government 141 Pryor St SW **AUTHORIZED REPRESENTATIVE** GA 30303 Atlanta

DocuSign^{*}

Certificate Of Completion

Envelope Id: 8534AB7A2B5F4903824358431262E5BA

Subject: Corporate Stops and Brass Fittings - Renewal 1

Parcel ID:

Source Envelope:

Document Pages: 4 Certificate Pages: 6 AutoNav: Enabled

Envelopeld Stamping: Enabled

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

Canada)

Status: Completed

Envelope Originator: Janelle Walker 141 Pryor Street

Purchasing & Contract Compliance, Suite 1168

Atlana, GA 30303

janelle.walker@fultoncountyga.gov IP Address: 73.184.132.220

Record Tracking

Status: Original

10/3/2024 10:32:16 AM Security Appliance Status: Connected

Storage Appliance Status: Connected

Holder: Janelle Walker

janelle.walker@fultoncountyga.gov Pool: StateLocal

Pool: Fulton County Government

Location: DocuSign

Location: DocuSign

Signer Events

Shane Slocum

sslocum@deltamunicipal.com

Vice President

Security Level: Email, Account Authentication

(None)

Signature

Signatures: 5

Initials: 0

Stamps: 1

Share Slown

Signature Adoption: Pre-selected Style Using IP Address: 50.225.151.194

Timestamp

Sent: 10/3/2024 10:38:14 AM Viewed: 10/7/2024 9:24:58 AM Signed: 10/8/2024 12:02:44 PM

Electronic Record and Signature Disclosure:

Accepted: 4/20/2020 3:57:53 PM

ID: d17391a9-5c6a-4d9f-98a2-bf2f5c9f0bf0

Shane Slocum

sslocum@deltamunicipal.com

Vice President

Security Level: Email, Account Authentication

(None)

Docusigned by:
Share Slown

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STATE OF

Sent: 10/8/2024 12:02:45 PM Viewed: 10/8/2024 12:03:25 PM Signed: 10/10/2024 11:34:05 AM

Signature Adoption: Pre-selected Style Using IP Address: 50.225.151.194

Electronic Record and Signature Disclosure:

Accepted: 4/20/2020 3:57:53 PM ID: d17391a9-5c6a-4d9f-98a2-bf2f5c9f0bf0

David Clark

david.clark@fultoncountyga.gov

Director Public Works

Security Level: Email, Account Authentication

(None)

Electronic Record and Signature Disclosure:

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

DocuSigned by:

David Clark
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Signature Adoption: Pre-selected Style Using IP Address: 107.115.112.32

Signed using mobile

Sent: 10/10/2024 11:34:07 AM Viewed: 10/10/2024 11:34:43 AM Signed: 10/10/2024 11:34:55 AM

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	Signed by: Robert L. Pitts 14E1B4AA5F6A44A Signature Adoption: Pre-selected Style Using IP Address: 166.137.19.38 Signed using mobile Docusigned by: Towya R. Grich

Notary Events	Signature	Timestamp	
Envelope Summary Events	Status	Timestamps	
Envelope Sent	Hashed/Encrypted	10/3/2024 10:38:14 AM	
Envelope Updated	Security Checked	10/3/2024 11:22:37 AM	
Envelope Updated	Security Checked	10/3/2024 1:34:34 PM	
Envelope Updated	Security Checked	10/3/2024 1:34:34 PM	
Envelope Updated	Security Checked	10/3/2024 1:34:34 PM	
Envelope Updated	Security Checked	10/3/2024 1:34:34 PM	
Envelope Updated	Security Checked	10/3/2024 1:34:34 PM	
Envelope Updated	Security Checked	10/3/2024 1:34:34 PM	
Envelope Updated	Security Checked	10/8/2024 3:22:30 PM	
Certified Delivered	Security Checked	10/10/2024 1:42:27 PM	
Signing Complete	Security Checked	10/10/2024 1:42:46 PM	
Completed	Security Checked	10/10/2024 1:42:50 PM	
Payment Events	Status	Timestamps	
Electronic Record and Signature Disclosure			

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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
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^{**} 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

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 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.