



**DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE**

**CONTRACT RENEWAL AGREEMENT**

**DEPARTMENT:** Real Estate and Asset Management

**BID/RFP# NUMBER:** 22ITB134833C-MH

**BID/RFP# TITLE:** Fire Extinguisher Testing and Maintenance Services

**ORIGINAL APPROVAL DATE:** 11/16/2022

**RENEWAL EFFECTIVE DATES:** 1/ 1/ 2025 **THROUGH** 12/ 31/2025

**RENEWAL OPTION #:** 2 OF 2

**NUMBER OF RENEWAL OPTIONS:** 2

**RENEWAL AMOUNT:** \$30,000.00

**COMPANY'S NAME:** Summit Fire & Security

**ADDRESS:** 2330 Pro Tec Way

**CITY:** Loganville

**STATE:** GA

**ZIP:** 30052

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

**Commissioners on BOC DATE:** \_\_\_\_\_ **BOC NUMBER:** \_\_\_\_\_

**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:**

**FULTON COUNTY, GEORGIA**

**SUMMIT FIRE & SECURITY**

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

\_\_\_\_\_  
**James Taylor  
Manager**

**ATTEST:**

**ATTEST:**

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

\_\_\_\_\_  
**Secretary/  
Assistant Secretary**

**(Affix County Seal)**

**(Affix Corporate Seal)**

**AUTHORIZATION OF RENEWAL:**

**ATTEST:**

\_\_\_\_\_  
**Joseph N. Davis, Director  
Department of Real Estate and Asset  
Management**

\_\_\_\_\_  
**Notary Public**

**County:**\_\_\_\_\_

**Commission Expires:** \_\_\_\_\_

**(Affix Notary Seal)**

**ITEM#: \_\_\_\_\_ RM: \_\_\_\_\_  
REGULAR MEETING**

**ITEM#: \_\_\_\_\_ 2<sup>nd</sup> RM: \_\_\_\_\_  
SECOND REGULAR MEETING**

# **CERTIFICATE OF INSURANCE**