



DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

CONTRACT RENEWAL AGREEMENT

DEPARTMENT: Real Estate and Asset Management

BID/RFP# NUMBER: 23ITB138805C-GS (C)

BID/RFP# TITLE: Carpet, Carpet Tile Installation and Repair Services Countywide

ORIGINAL APPROVAL DATE: 4/17/2024

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

RENEWAL OPTION #: 1 OF 2

NUMBER OF RENEWAL OPTIONS: 2

RENEWAL AMOUNT: \$75,000.00

COMPANY'S NAME: Brad Construction Company II, LLC

ADDRESS: 3406 Florence Circle

CITY: Powder Springs

STATE: GA

ZIP: 30127

This Renewal Agreement No. 1 was approved by the Fulton County Board of

Commissioners on BOC DATE: 10/16/2024 BOC NUMBER: 24-0683

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

BRAD CONSTRUCTION COMPANY II, LLC


Signed by:
Robert L. Pitts
14E1B4AA5F6A44A
Robert L. Pitts, Chairman
Fulton County Board of Commissioners

DocuSigned by:
Jameel Hanif
46919D1C6EEC42D
Jameel Hanif
Principal

ATTEST:

ATTEST:

DocuSigned by:
Tonya R. Grier
EFC476C4837648D
Tonya R. Grier
Clerk to the Commission

(Affix County Seal) 

**Secretary/
Assistant Secretary**

(Affix Corporate Seal)

AUTHORIZATION OF RENEWAL:

ATTEST:

Signed by:
Joseph N. Davis
F45C5C5E17EB417
Joseph N. Davis, Director
Department of Real Estate and Asset Management

Signed by:
[Signature]
C54C66C2375E453
Notary Public

County: Fayette

Commission Expires: March 26, 2027

(Affix Notary Seal) 

ITEM#: _____ RCS: _____ REGULAR MEETING	24-0683c 10/16/2024 ITEM#: _____ 2nd RM: _____ SECOND REGULAR MEETING
---	---

CERTIFICATE OF INSURANCE

24-0682 Real Estate and Asset Management

Request approval to renew existing contracts - Department of Real Estate and Asset Management, 23ITB110923C-GS, HVAC On Call Maintenance Services Countywide in an amount not to exceed \$1,200,000.00 with (A) Mechanical Services, Inc. (Hapeville, GA) in an amount not to exceed \$400,000.00; (B) Trane U.S., Inc. (Atlanta, GA) in an amount not to exceed \$350,000.00; (C) 5 Seasons Mechanical LLC (Norcross, GA) in an amount not to exceed \$250,000.00; and (D) JR Hobbs Co. - Atlanta, LLC (Lawrenceville, GA) in an amount not to exceed \$200,000.00, to provide standby on-site HVAC on call maintenance services of air conditioning systems on an "as needed" basis for all County facilities. This action exercises the first of two renewal options. One renewal option remains. Effective dates: January 1, 2025, through December 31, 2025.

24-0683 Real Estate and Asset Management

Request approval to renew existing contracts - Department of Real Estate and Asset Management, 23ITB138805C-GS, Carpet, Carpet Installation and Repair Services Countywide, in an amount not to exceed \$345,000.00 with (A) G.S.A.T. Restoration, Inc. dba Paul Davis of North Atlanta (Norcross, GA) in an amount not to exceed \$145,000.00; (B) HPI Floor, LLC (Atlanta, GA) in an amount not to exceed \$125,000.00; and (C) Brad Construction Company II (Fayetteville, GA) in the amount not to exceed \$75,000.00, to provide carpet, carpet tile installation and repair services on an "as-needed" basis for Countywide facilities. This action exercises the first of two renewal options. One renewal option remains. Effective dates: January 1, 2025, through December 31, 2025.

24-0684 Real Estate and Asset Management

Request approval to renew existing contracts - Department of Real Estate and Asset Management, 23ITB138804C-GS, Electrical on Call Maintenance Services Countywide in an amount not to exceed \$375,000.00, with (A) Capital City Electrical Services, LLC (Norcross, GA) in an amount not to exceed \$165,000.00; (B) ALL-N-1 Security Services, Inc. (Atlanta, GA) in an amount not to exceed \$160,000.00; and (C) Electrify Atlanta, LLC (Roswell, GA) in an amount not to exceed \$50,000.00, to provide standby on-site electrical on-call maintenance services on an "as needed" basis for all Fulton County facilities. This action exercises the first of two renewal options. One renewal option remains. Effective dates: January 1, 2025, through December 31, 2025.

COUNTY MANAGER'S ITEMS**Open & Responsible Government****24-0685 County Manager**

Presentation of the Fulton County Operational Report.

24-0686 Finance

Presentation, review, and approval of October 16, 2024, Budget Soundings and Resolution.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/23/2024

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).

<p>PRODUCER State Farm Jerome Hubbard Sr ins Agency Inc 431 Pine Ave Albany GA 31701</p>	<p>CONTACT NAME: Jerome Hubbard PHONE (A/C, No, Ext): 229-883-4810 FAX (A/C, No): 229-883-4810 E-MAIL ADDRESS: Jerome@JeromeHubbard.com</p>														
<p>INSURED Jameel Hanif and Brad Construction Company II LLC 500 Lanier Ave W Ste 801 Fayetteville GA 30214</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : State Farm Mutual Automobile Insurance Company</td> <td style="text-align: center;">25178</td> </tr> <tr> <td>INSURER B :</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : State Farm Mutual Automobile Insurance Company	25178	INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A : State Farm Mutual Automobile Insurance Company	25178														
INSURER B :															
INSURER C :															
INSURER D :															
INSURER E :															
INSURER F :															

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.

INSR LTR	TYPE OF INSURANCE	ADD INSD	SUB WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY		Y	749 0474-B05-11D 886 5309-B15-11B	08/05/2024 08/15/2024	02/05/2025 02/15/2025	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 1,000,000 BODILY INJURY (Per accident) \$ 1,000,000 PROPERTY DAMAGE (Per accident) \$ 1,000,000 \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 14 Ford F250 SD VIN: 1FT7W2BT7EEB39018
 15 Ford Trans 250 VIN: 1FTNR3XV3FKA29598

CERTIFICATE HOLDER

CANCELLATION

Fulton County Government 141 Pryor St SW Atlanta GA 30303	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE </p>
---	---



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/22/2024

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).

PRODUCER Oakbridge Insurance Agency 16 Hampton St McDonough, GA 30253	CONTACT NAME: Meghan Holder PHONE (A/C, No, Ext): _____ FAX (A/C, No): _____ E-MAIL ADDRESS: meghanholder@strawnsinsurance.com
INSURER(S) AFFORDING COVERAGE	
INSURED	NAIC #
Brad Construction Company II LLC 500 W. Lanier Avenue Suite 801 Fayetteville, GA 30214	INSURER A : Harford Mutual Insurance Company 14141 INSURER B : Builders Insurance (an Association Captive Company) 10704 INSURER C : Capitol Specialty Ins Co 10328 INSURER D : _____ INSURER E : _____ INSURER F : _____

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER: _____	X		MP10825006	7/29/2024	7/29/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 _____ \$ _____
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ _____ BODILY INJURY (Per person) \$ _____ BODILY INJURY (Per accident) \$ _____ PROPERTY DAMAGE (Per accident) \$ _____ _____ \$ _____
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	X		CU104732910	7/29/2024	7/29/2025	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ _____ AGG \$ 2,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WCV0223426 08	7/29/2024	7/29/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Equipment Floater			MP10825006	7/29/2024	7/29/2025	Rented/Leased 250,000
C	Pollution Liability			EV2024046301	8/23/2024	8/23/2025	Occurrence/Aggregate 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Additional Insured per form CG2037 in regards to the General Liability if required by contract. Umbrella follows form

CERTIFICATE HOLDER Fulton County Government 141 Pryor St. SW Atlanta, GA 30303	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
--	--

POLICY NUMBER: MP10825006

COMMERCIAL GENERAL LIABILITY
CG 20 37 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
ANY PERSON OR ORGANIZATION THAT HAS ENTERED INTO A WRITTEN CONSTRUCTION CONTRACT OR WRITTEN CONSTRUCTION AGREEMENT WITH THE NAMED INSURED	Various

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
 2. Available under the applicable Limits of Insurance shown in the Declarations;
- whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

Certificate Of Completion

Envelope Id: 3CCEE34746A84047B3C724DF251314D9 Status: Completed
Subject: 23ITB138805C-GS (C) Carpet, Carpet Tile Installation and Repair Services Countywide 2025 Renewal
Parcel ID:
Employee Name:
Source Envelope:
Document Pages: 7 Signatures: 5 Envelope Originator:
Certificate Pages: 6 Initials: 0 Gertis Strozier
AutoNav: Enabled Stamps: 2 141 Pryor Street
Envelopeld Stamping: Enabled Purchasing & Contract Compliance, Suite 1168
Time Zone: (UTC-05:00) Eastern Time (US & Atlanta, GA 30303
Canada) gertis.strozier@fultoncountyga.gov
IP Address: 76.198.156.253

Record Tracking

Status: Original Holder: Gertis Strozier Location: DocuSign
10/18/2024 4:14:07 PM gertis.strozier@fultoncountyga.gov
Security Appliance Status: Connected Pool: StateLocal
Storage Appliance Status: Connected Pool: Fulton County Government Location: DocuSign

Signer Events

Jameel Hanif, Principal
jhanif@bradconstruction.com
Principal
Brad Construction Co. II
Security Level: Email, Account Authentication (None)

Signature

DocuSigned by:
[Signature]
46919D1C8EFC42D...
Signature Adoption: Drawn on Device
Using IP Address: 73.106.95.236
Signed using mobile

Timestamp

Sent: 10/18/2024 5:03:18 PM
Viewed: 10/18/2024 8:51:17 PM
Signed: 10/18/2024 8:54:57 PM

Electronic Record and Signature Disclosure:
Accepted: 10/18/2024 8:51:17 PM
ID: 70c9bb7a-c9ad-49ec-aa32-7b378cab5b7f

Falonda
fhanif@bradconstruction.com
Security Level: Email, Account Authentication (None)

Signed by:
[Signature]
C54C66C2375E453...



Signature Adoption: Drawn on Device
Using IP Address: 73.106.95.236
Signed using mobile

Sent: 10/18/2024 8:57:47 PM
Viewed: 10/18/2024 8:59:43 PM
Signed: 10/18/2024 9:00:50 PM

Electronic Record and Signature Disclosure:
Accepted: 10/18/2024 8:59:43 PM
ID: bb5a957b-acaf-498d-96b5-2d3bc35063e0

Gertis Strozier
gertis.strozier@fultoncountyga.gov
Assistant Purchasing Agent
CRM SERVICES, LLC
Security Level: Email, Account Authentication (None)

Completed

Using IP Address: 76.198.156.253

Sent: 10/18/2024 9:00:54 PM
Viewed: 11/1/2024 12:47:20 AM
Signed: 11/1/2024 10:02:04 AM

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Signer Events

Joseph N. Davis
joseph.davis@fultoncountyga.gov
Director
Security Level: Email, Account Authentication (None)

Signature

Signed by:
Joseph N. Davis
E45C5C5F17FB417...
Signature Adoption: Pre-selected Style
Using IP Address: 69.236.118.50
Signed using mobile

Timestamp

Sent: 11/1/2024 10:02:07 AM
Viewed: 11/1/2024 9:42:46 PM
Signed: 11/3/2024 4:51:49 AM

Electronic Record and Signature Disclosure:

Accepted: 11/3/2024 4:51:40 AM
ID: f7f77c2e-92ab-4954-9b16-0701bbfaff3c

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: 11/3/2024 4:51:52 AM
Viewed: 11/3/2024 4:53:39 AM
Signed: 11/4/2024 2:25:27 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: 166.137.175.13
Signed using mobile

Sent: 11/4/2024 2:25:31 PM
Viewed: 11/4/2024 9:21:16 PM
Signed: 11/4/2024 9:21:31 PM

Electronic Record and Signature Disclosure:

Accepted: 11/4/2024 9:21:16 PM
ID: 47f5b5d9-82b1-4d3a-adb0-9ec620958463

Tonya R. Grier
tonya.grier@fultoncountyga.gov
Clerk to the Commission
Fulton County
Security Level: Email, Account Authentication (None)

DocuSigned by:
Tonya R. Grier
EEC476C4837648D...



Signature Adoption: Pre-selected Style
Using IP Address: 99.96.24.191

Sent: 11/4/2024 9:21:34 PM
Viewed: 11/4/2024 9:24:07 PM
Signed: 11/5/2024 7:02:08 AM

Electronic Record and Signature Disclosure:

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

Gertis Strozier
gertis.strozier@fultoncountyga.gov
Assistant Purchasing Agent
CRM SERVICES, LLC
Security Level: Email, Account Authentication (None)

Completed

Using IP Address: 74.174.59.4

Sent: 11/5/2024 7:02:13 AM
Viewed: 11/10/2024 11:37:17 PM
Signed: 11/20/2024 10:04:00 AM

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 dian.devaughn@futoncountyga.gov Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign	<div style="border: 2px solid blue; padding: 5px; display: inline-block;">COPIED</div>	Sent: 11/20/2024 10:04:05 AM
--	---	------------------------------

Witness Events	Signature	Timestamp
----------------	-----------	-----------

Notary Events	Signature	Timestamp
---------------	-----------	-----------

Envelope Summary Events	Status	Timestamps
-------------------------	--------	------------

Envelope Sent	Hashed/Encrypted	10/18/2024 5:03:18 PM
Envelope Updated	Security Checked	11/1/2024 10:01:03 AM
Certified Delivered	Security Checked	11/10/2024 11:37:17 PM
Signing Complete	Security Checked	11/20/2024 10:04:00 AM
Completed	Security Checked	11/20/2024 10:04:05 AM

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

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.

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 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 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.