



DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

CONTRACT RENEWAL AGREEMENT

DEPARTMENT: Public Works

BID/RFP NUMBER: 23ITB08142023A-JWT

BID/RFP TITLE: Large Water Meter Installation Service

ORIGINAL APPROVAL DATE: December 20, 2023

RENEWAL EFFECTIVE DATES: January 1, 2025

RENEWAL OPTION #: 1 OF 2

NUMBER OF RENEWAL OPTIONS: One renewal option remains

RENEWAL AMOUNT: \$500,000.00

COMPANY'S NAME: Jewel of the South, Inc.

ADDRESS: 1540 Hwy 138 SE, Ste. 4B

CITY: Conyers

STATE: GA

ZIP: 30013

This Renewal Agreement No. 1 was approved by the Fulton County Board of Commissioners on BOC DATE: September 4, 2024 BOC NUMBER: 24-0571

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

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
Public Works

Jewel of the South, Inc.

DocuSigned by:

Valisa Shannon

Valisa Shannon
CEO

ATTEST:

**Secretary/
Assistant Secretary**

(Affix Corporate Seal)

ATTEST:

DocuSigned by:

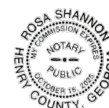
Rosa Shannon

Notary Public

County: Henry

Commission Expires: 10/15/2025

Signed by:
(Affix Notary Seal)



ITEM#: 24-0571 RCS: 9/4/2024
REGULAR MEETING

ITEM#: _____ RM: _____
SECOND REGULAR MEETING

CERTIFICATE OF INSURANCE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/17/2024

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 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 Viking Insurance Services 7824 Hickory Flat Hwy Suite 160 Woodstock GA 30188 | | CONTACT NAME: Mell De Castro PHONE (A/C, No, Ext): 888-208-7227 E-MAIL ADDRESS: shane@visvcs.com FAX (A/C, No): 888-778-8117 | |
| INSURED Jewel Of The South 1540 Highway 138 Se Ste 4B Conyers GA 30013 | | INSURER(S) AFFORDING COVERAGE INSURER A : Evanston Insurance Co, Insurance Company INSURER B : Great American Insurance Group 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 | 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 | | | 3AA744723 | 1/24/2024 | 1/24/2025 | EACH OCCURRENCE |
| | <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR | Y | Y | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | | MED EXP (Any one person) |
| | <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | | | | | | PERSONAL & ADV INJURY |
| | OTHER: | | | | | | GENERAL AGGREGATE |
| | | | | | | | PRODUCTS - COMP/OP AGG |
| | | | | | | | \$ |
| | AUTOMOBILE LIABILITY | | | | | | COMBINED SINGLE LIMIT (Ea accident) |
| | <input type="checkbox"/> ANY AUTO | <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS | BODILY INJURY (Per person) | | | | |
| | <input type="checkbox"/> ALL OWNED AUTOS | | BODILY INJURY (Per accident) | | | | |
| | <input type="checkbox"/> HIRED AUTOS | | PROPERTY DAMAGE (Per accident) | | | | |
| | | | | | | | \$ |
| A | <input type="checkbox"/> UMBRELLA LIAB | Y | Y | EZXS3144507 | 1/24/2024 | 1/24/2025 | EACH OCCURRENCE |
| | <input checked="" type="checkbox"/> EXCESS LIAB | | | | | | AGGREGATE |
| | <input type="checkbox"/> CLAIMS-MADE | | | | | | \$ |
| | DED <input type="checkbox"/> RETENTION \$ | | | | | | |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | Y / N | N / A | | | | PER STATUTE |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) | | | | | | OTH-ER |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | E.L. EACH ACCIDENT |
| | | | | | | | E.L. DISEASE - EA EMPLOYEE |
| | | | | | | | E.L. DISEASE - POLICY LIMIT |
| B | Commercial Inland Marine - Rental Equipmen | Y | | IMP E925033 01 | 12/30/2023 | 12/30/2024 | Limit: \$\$150,000 |

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

Project Name: 23ITB08142023A-JWT Large Water Meter Installation Services on the Certificate.

CERTIFICATE HOLDER

CANCELLATION

| | |
|---|--|
| Fulton County Government – Purchasing and Contract Compliance Departmer 130 Peachtree St SW Suite 1168 Atlanta 30303 | 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 <i>Shane McGinley</i> |
|---|--|

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ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/18/2024

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 any rights to the certificate holder in lieu of such endorsement(s).

| PRODUCER McGriff Insurance Services LLC 736 Market St., 10th Floor Chattanooga, TN 37402 423 756-0711 | CONTACT NAME: Emerie Germ QCLS AINS AAI CISR PHONE (A/C, No, Ext): 423 756-0711 FAX (A/C, No): 4232658543 E-MAIL ADDRESS: Emerie.Germ@mcgriff.com | | | | | | | | | | | | | | | | | | | | | |
|--|--|-------------------------------|--|--------|---|--|--------------|--------------------|--|--|--------------------|--|--|--------------------|--|--|--------------------|--|--|--------------------|--|--|
| INSURED Jewel of the South Inc. 1540 Highway 138 SE Suite 45 Conyers, GA 30013-1297 | <table><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td colspan="2">INSURER A : Bridgefield Casualty Insurance Company</td><td>10335</td></tr><tr><td colspan="2">INSURER B :</td><td></td></tr><tr><td colspan="2">INSURER C :</td><td></td></tr><tr><td colspan="2">INSURER D :</td><td></td></tr><tr><td colspan="2">INSURER E :</td><td></td></tr><tr><td colspan="2">INSURER F :</td><td></td></tr></table> | INSURER(S) AFFORDING COVERAGE | | NAIC # | INSURER A : Bridgefield Casualty Insurance Company | | 10335 | INSURER B : | | | INSURER C : | | | INSURER D : | | | INSURER E : | | | INSURER F : | | |
| INSURER(S) AFFORDING COVERAGE | | NAIC # | | | | | | | | | | | | | | | | | | | | |
| INSURER A : Bridgefield Casualty Insurance Company | | 10335 | | | | | | | | | | | | | | | | | | | | |
| 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 | ADDL INSR | SUBR 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 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) \$ \$ |
| | UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$ | | | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ |
| A | 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 | 19655884 | 08/24/2024 | 08/24/2025 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.I. EACH ACCIDENT \$ 1,000,000 E.I. DISEASE - EA EMPLOYEE \$ 1,000,000 E.I. DISEASE - POLICY LIMIT \$ 1,000,000 |

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

Request for Bid/Proposal # 231TB08142023A-JWT Large Water Meter Installation Services

CERTIFICATE HOLDER

CANCELLATION

Fulton County Government
Purchasing and Contract Compliance
Department
130 Peachtree Street, SW Suite 1168
Atlanta, GA 30303-3459

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

Manjiv Kumar

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Certificate Of Completion

Envelope Id: EF10886F4B2F4BEEA988C800DE605D6E

Status: Completed

Subject: Large Water Meter Installation Service - Renewal 1

Parcel ID:

Employee Name:

Source Envelope:

Document Pages: 6

Signatures: 5

Envelope Originator:

Certificate Pages: 6

Initials: 0

Janelle Walker

AutoNav: Enabled

Stamps: 1

141 Pryor Street

Envelopeld Stamping: Enabled

Purchasing & Contract Compliance, Suite 1168

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

Atlanta, GA 30303

janelle.walker@fultoncountyga.gov

IP Address: 73.184.132.220

Record Tracking

Status: Original

Holder: Janelle Walker

Location: DocuSign

9/16/2024 9:07:08 AM

janelle.walker@fultoncountyga.gov

Security Appliance Status: Connected

Pool: StateLocal

Storage Appliance Status: Connected

Pool: Fulton County Government

Location: DocuSign

Signer Events**Signature****Timestamp**

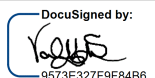
Valisa Shannon

valisa@jewelofthesouth.us

CEO

Security Level: Email, Account Authentication (None)

DocuSigned by:


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Sent: 9/16/2024 9:17:26 AM

Resent: 9/18/2024 9:41:46 AM

Viewed: 9/18/2024 10:05:49 AM

Signed: 9/18/2024 10:05:58 AM

Signature Adoption: Drawn on Device

Using IP Address: 172.56.64.102

Signed using mobile

Electronic Record and Signature Disclosure:

Accepted: 9/17/2024 4:17:06 PM

ID: ce76f074-57fa-43ca-9b3a-948913270f0f

Rosa Shannon

rosa@jewelofthesouth.us

Security Level: Email, Account Authentication (None)

DocuSigned by:


 5115AB4CE51741D...


Sent: 9/18/2024 10:05:59 AM

Viewed: 9/18/2024 11:59:39 AM

Signed: 9/18/2024 12:01:52 PM

Signature Adoption: Pre-selected Style

Using IP Address: 76.17.30.211

Electronic Record and Signature Disclosure:

Accepted: 1/5/2024 4:48:26 PM

ID: 045a991b-2d1a-4529-b92b-f301e259c26e

David Clark

david.clark@fultoncountyga.gov

Director

Public Works

Security Level: Email, Account Authentication (None)

DocuSigned by:


 65CE1C9FDD834B8...

Sent: 9/18/2024 12:01:55 PM

Viewed: 9/18/2024 12:08:26 PM

Signed: 9/18/2024 12:08:33 PM

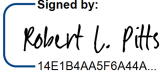
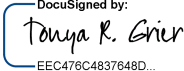
Signature Adoption: Pre-selected Style

Using IP Address: 68.208.197.4

Electronic Record and Signature Disclosure:

Accepted: 11/13/2017 1:07:14 PM

ID: 62e0a41e-60ea-4640-a1cb-69bfc2cfa732

| Signer Events | Signature | Timestamp |
|---|--|--|
| <p>Nikki Peterson nikki.peterson@fultoncountyga.gov Chief Deputy Clerk to the Board of Commissioners Fulton County Government Security Level: Email, Account Authentication (None)</p> <p>Electronic Record and Signature Disclosure: Accepted: 11/27/2017 1:39:37 PM ID: b7ce88ee-0c66-4f3a-bfee-705e0af602d8</p> | <p>Completed</p> <p>Using IP Address: 68.208.197.4</p> | <p>Sent: 9/18/2024 12:08:35 PM Viewed: 9/19/2024 1:20:24 PM Signed: 9/19/2024 1:22:18 PM</p> |
| <p>Robert L. Pitts harriet.thomas@fultoncountyga.gov Chairman Security Level: Email, Account Authentication (None)</p> <p>Electronic Record and Signature Disclosure: Accepted: 9/19/2024 3:30:31 PM ID: 11c7c1db-2df9-4c58-a45d-4a0f84a02099</p> | <p>Signed by:  14E1B4AA5F6A44A...</p> <p>Signature Adoption: Pre-selected Style Using IP Address: 68.208.197.4</p> | <p>Sent: 9/19/2024 1:22:20 PM Viewed: 9/19/2024 3:30:31 PM Signed: 9/19/2024 3:30:40 PM</p> |
| <p>Tonya R. Grier Tonya.Grier@fultoncountyga.gov Clerk to the Commission Fulton County Security Level: Email, Account Authentication (None)</p> <p>Electronic Record and Signature Disclosure: Accepted: 3/16/2018 10:54:59 AM ID: f3f241e8-3027-4447-9476-6cf20ae25dd4</p> | <p>DocuSigned by:  EEC476C4837648D...</p> <p>Signature Adoption: Pre-selected Style Using IP Address: 166.137.19.22 Signed using mobile</p> | <p>Sent: 9/19/2024 3:30:41 PM Viewed: 9/19/2024 3:46:59 PM Signed: 9/19/2024 3:47:12 PM</p> |
| 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 |
| <p>Andrenette Whitlow andrenette.whitlow@fultoncountyga.gov Security Level: Email, Account Authentication (None)</p> <p>Electronic Record and Signature Disclosure: Accepted: 3/9/2023 3:21:00 PM ID: ad58dfa7-b842-4576-bfdc-d4bd40584d8f</p> | <p>COPIED</p> | <p>Sent: 9/19/2024 3:47:14 PM</p> |
| <p>Dian DeVaughn Dian.DeVaughn@fultoncountyga.gov Security Level: Email, Account Authentication (None)</p> <p>Electronic Record and Signature Disclosure: Not Offered via DocuSign</p> | <p>COPIED</p> | <p>Sent: 9/19/2024 3:47:15 PM Viewed: 9/20/2024 10:05:09 AM</p> |
| Witness Events | Signature | Timestamp |

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

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

| | | |
|---------------------|------------------|----------------------|
| Envelope Sent | Hashed/Encrypted | 9/16/2024 9:17:27 AM |
| Envelope Updated | Security Checked | 9/18/2024 9:41:45 AM |
| Envelope Updated | Security Checked | 9/18/2024 9:41:45 AM |
| Envelope Updated | Security Checked | 9/18/2024 9:41:45 AM |
| Envelope Updated | Security Checked | 9/18/2024 9:41:45 AM |
| Envelope Updated | Security Checked | 9/18/2024 9:41:45 AM |
| Envelope Updated | Security Checked | 9/18/2024 9:41:45 AM |
| Envelope Updated | Security Checked | 9/18/2024 9:41:45 AM |
| Envelope Updated | Security Checked | 9/18/2024 9:41:45 AM |
| Certified Delivered | Security Checked | 9/19/2024 3:46:59 PM |
| Signing Complete | Security Checked | 9/19/2024 3:47:12 PM |
| Completed | Security Checked | 9/19/2024 3:47:15 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

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.

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