



**EXTENSION #6
FORM TO CONTRACT**

#17RFP031617K-DJ

**Progressive Design/Build Services
for Big Creek Water
Reclamation Facility (WRF)
Expansion Project Phase 2B**

DEPARTMENT OF PUBLIC WORKS

EXTENSION NO. 6 TO FORM OF CONTRACT

Contractor: **Archer Western-Brown and Caldwell Joint Venture**

Contract No.: **17RFP031617K-DJ, Progressive Design/Build Services for Big Creek Water Reclamation Facility (WRF) Expansion Project Phase 2B**

Address: **990 Hammond Drive**
City, State **Atlanta, GA 30328**

Telephone: **404-926-0771**

Email: dpetersen@walshgroup.com

Contact: **Duane Petersen,**
Vice President

W I T N E S S E T H

WHEREAS, Fulton County ("County") entered into a Contract with Archer Western-Brown and Caldwell Joint Venture to provide/perform progressive design/build (PBD) services on behalf of the Department Public Works; and

WHEREAS, additional time was required to complete the construction punchlist, which included twenty-four (24) final items necessary to complete the project per the County expectations and

WHEREAS, the County acknowledges that the Archer Western-Brown and Caldwell Joint Venture, achieved substantial completion of the PDB Big Creek WRF Expansion and Upgrade as of August 6, 2025 and will achieve final completion on October 31, 2025; and

WHEREAS, the Contractor has performed satisfactorily over the period of the contract; and

WHEREAS, this Extension was approved by the Fulton County Board of Commissioners on the 1st day of October 2025; Item #25-0731.

NOW, THEREFORE, the County and the Contractor agree as follows:

This Extension No. 6 to Form of Contract is effective as of the 1st day of October 2025 between the County and Archer Western-Brown and Caldwell Joint Venture, who agree that all Services specified will be performed in accordance with this Extension No. 6 to Form of Contract and the Contract Documents for an additional period, with the contract ending as of October 31st, 2025.

1. **COMPENSATION:** The services described under Scope of Work herein shall be performed by Contractor for a total amount not to exceed amount of \$4,810,722.37 (Four Million Eight Hundred Ten Thousand Seven Hundred Twenty-Two Dollars and Thirty-Seven Cents) which is the final payment required to complete the work under this contract.
3. **LIABILITY OF COUNTY:** This Extension No. 6 to Form of Contract shall not become binding on the County and the County shall incur no liability upon same until such agreement has been executed by the Chair to the Commission, attested to by the Clerk to the Commission and delivered to Contractor.
4. **EFFECT OF EXTENSION NO. 1 TO FORM OF CONTRACT:** Except as modified by this Extension No. 6 to Form of Contract, the Contract, and all Contract Documents, remain in full force and effect.

IN WITNESS THEREOF, the Parties hereto have caused this Contract to be executed by their duly authorized representatives as attested and witnessed and their corporate seals to be hereunto affixed as of the day and year date first above written.

OWNER:

FULTON COUNTY, GEORGIA

Signed by:

Robert L. Pitts

Robert L. Pitts, Chairman
Fulton County Board of Commissioners

CONTRACTOR:

**ARCHER WESTERN-BROWN
CALDWELL (a joint-venture)**

Duane Petersen

Duane Petersen
Chief Operating Officer



ATTEST:

Signed by:

Tonya R. Grier

Tonya R. Grier
Clerk to the Commission

(Affix County Seal)



Rod Pope

Rod Pope,
Vice President



APPROVED AS TO FORM:

Signed by:

Kaye Burwell

Kaye Burwell
Office of the County Attorney

APPROVED AS TO CONTENT:

DocuSigned by:

David Clark

David E. Clark, Director
Department of Public Works

ITEM#: 25-0731	RM: 10/01/2025	ITEM#: _____	2 ND RM: _____
REGULAR MEETING		SECOND REGULAR MEETING	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/25/2025

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 Alliant Insurance Services, Inc. 353 N Clark St 11th Fl Chicago IL 60654	CONTACT NAME: Jordan Laeyendecker PHONE (A/C, No. Ext): FAX (A/C, No): E-MAIL ADDRESS: Jordan.Laeyendecker@alliant.com														
INSURED Archer Western - Brown and Caldwell, Joint Venture 929 West Adams Chicago IL 60607	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A: Arch Insurance Company</td> <td>11150</td> </tr> <tr> <td>INSURER B: Arch Indemnity Insurance Compa</td> <td>30830</td> </tr> <tr> <td>INSURER C: Allied World Assurance Company</td> <td>19489</td> </tr> <tr> <td>INSURER D: Starr Indemnity & Liability Co</td> <td>38318</td> </tr> <tr> <td>INSURER E: Arch Specialty Insurance Compa</td> <td>21199</td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Arch Insurance Company	11150	INSURER B: Arch Indemnity Insurance Compa	30830	INSURER C: Allied World Assurance Company	19489	INSURER D: Starr Indemnity & Liability Co	38318	INSURER E: Arch Specialty Insurance Compa	21199	INSURER F:	
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INSURER D: Starr Indemnity & Liability Co	38318														
INSURER E: Arch Specialty Insurance Compa	21199														
INSURER F:															

 License#: 0C36861
 WALSCON-04
COVERAGES**CERTIFICATE NUMBER:** 369628354**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	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PROJECT ☒ LOC OTHER:	Y		41PKG8901919	6/1/2025	6/1/2026	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$25,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000 \$
A	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY	Y		41PKG8901919 41CAB8902019	6/1/2025 6/1/2025	6/1/2026 6/1/2026	COMBINED SINGLE LIMIT (Ea accident) \$5,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	☒ UMBRELLA LIAB ☒ EXCESS LIAB ☒ OCCUR ☐ CLAIMS-MADE DED RETENTION \$	Y		41UFP1992102 1000588415251	6/1/2025 6/1/2025	6/1/2026 6/1/2026	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 2nd Layer Excess \$5,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☒ Y ☐ N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y	44WCI8937512	6/1/2025	6/1/2026	☒ PER STATUTE ☐ OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
C	Pollution Liability			0314-7052	6/1/2025	6/1/2026	Each Occ./Agg. \$20,000,000
E	Professional Liability			CPP006887002	6/1/2025	6/1/2026	Each Occ./Agg. \$10,000,000

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

 RE: Progressive Design/Build Services for Big Creek Water Reclamation Facility (WRF) Expansion Project, Phase 2B - Project No.: 17RFP031617K-DJ.
 AW/Brown and Caldwell Job No.: 220098.

Fulton County Government, its appointed and elected officials, departments, agencies, boards, commissions, its officers, employees and volunteers are Additional Insureds pertaining to General Liability, Automobile Liability and Excess Liability with respects to liability arising out of the Named Insured's operations on the referenced project. Professional services for Architects, Engineers, Consultants, etc. are excluded.

A Waiver of Subrogation in favor of Fulton County Government, its appointed and elected officials, departments, agencies, boards, committees, its officers, See Attached...

CERTIFICATE HOLDER**CANCELLATION**
 Fulton County
 Department of Public Works
 130 Peachtree Street SW
 Atlanta GA 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

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ADDITIONAL REMARKS SCHEDULE

AGENCY Alliant Insurance Services, Inc.		NAMED INSURED Archer Western - Brown and Caldwell, Joint Venture 929 West Adams Chicago IL 60607	
POLICY NUMBER			
CARRIER	NAIC CODE		
		EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

agents, employees and voluteers is included on the Workers Compensation policy.

This insurance will be Primary and Non-Contributory to the General Liability, Automobile Liability and Excess Liability policies with respect to any other available insurance to the Additional Insureds for the negligence of the insured on the referenced project.

The General Liability policy includes the perils of (XCU) Explosion, Collapse and Underground.

The General Liability does not have an exclusion for demolition work.

Excess Liability follows form to the underlying General Liability, Automobile Liability and Employers Liability policies.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**NOTICE OF CANCELLATION – CERTIFICATE HOLDERS
(SPECIFIED DAYS)**

The person(s) or organization(s) listed or described in the Schedule below have requested that they receive written notice of cancellation when this policy is cancelled by us. We will mail or deliver to the Person(s) or Organization(s) listed or described in the Schedule a copy of the written notice of cancellation that we sent to you. If possible, such copies of the notice will be mailed at least **60** days, except for cancellation for non-payment of premium which will be mailed 10 days, prior to the effective date of the cancellation, to the address or addresses of certificate holders as provided by your broker or agent.

Schedule

Person(s) or Organization(s) including mailing address:

All certificate holders where written notice of the cancellation of this policy is required by written contract, permit or agreement with the Named Insured and whose names and addresses will be provided by the broker or agent listed in the Declarations Page of this policy for the purposes of complying with such request.

This notification of cancellation of the policy is intended as a courtesy only. Our failure to provide such notification to the person(s) or organization(s) shown in the Schedule will not extend any policy cancellation date nor impact or negate any cancellation of the policy. This endorsement does not entitle the person(s) or organization(s) listed or described in the Schedule above to any benefit, rights or protection under this policy.

Any provision of this endorsement that is in conflict with a statute or rule is hereby amended to conform to that statute or rule.

All other terms and conditions of this policy remain unchanged.

Endorsement Number:

Policy Number: 44WCI8937512

Named Insured: WALSH CONSTRUCTION GROUP, LLC

This endorsement is effective on the inception date of this Policy unless otherwise stated herein:

Endorsement Effective Date: 06-01-25

POLICY NUMBER: 41PKG8901919

COMMERCIAL GENERAL LIABILITY
CG 20 10 07 04**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.****ADDITIONAL INSURED – OWNERS, LESSEES OR
CONTRACTORS – SCHEDULED PERSON OR
ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):	Location(s) Of Covered Operations
Any person or organization, you have agreed by means of a written contract or agreement, to add as an additional insured; such person or organization is an additional insured on this policy. When required by a written contract or agreement, coverage afforded to these additional insured parties will be primary to and non-contributory with any other insurance available to that person or organization.	
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", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

Certificate Of Completion

Envelope Id: BA312E4D-3D16-4C15-8167-17FDF9F4DF53

Status: Completed

Subject: 17RFP031617K-DJ; PDB Change Order and Ext. 6

Parcel ID:

Employee Name:

Source Envelope:

Document Pages: 10

Signatures: 4

Envelope Originator:

Certificate Pages: 6

Initials: 0

Darlene Banks

AutoNav: Enabled

Stamps: 1

141 Pryor Street

Envelopeld Stamping: Enabled

Purchasing & Contract Compliance, Suite 1168

Time Zone: (UTC-08:00) Pacific Time (US &

Atlanta, GA 30303

Canada)

darlene.banks@fultoncountyga.gov

IP Address: 74.174.59.4

Record Tracking

Status: Original

Holder: Darlene Banks

Location: DocuSign

10/2/2025 8:21:04 AM

darlene.banks@fultoncountyga.gov

Security Appliance Status: Connected

Pool: StateLocal

Storage Appliance Status: Connected

Pool: Fulton County Government

Location: Docusign

Signer Events

Signature

Timestamp

DARLENE BANKS

Completed

Sent: 10/8/2025 7:17:44 AM

darlene.banks@fultoncountyga.gov

Resent: 10/8/2025 7:17:50 AM

Assistant Purchasing Agent

Viewed: 10/8/2025 7:18:57 AM

Fulton County Government

Using IP Address: 134.231.232.249

Signed: 10/8/2025 7:19:03 AM

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure:

Not Offered via Docusign

David Clark

DocuSigned by:

david.clark@fultoncountyga.gov

David Clark

Sent: 10/8/2025 7:19:04 AM

Director

Viewed: 10/8/2025 10:29:13 AM

Public Works

Signed: 10/8/2025 10:29:21 AM

Security Level: Email, Account Authentication (None)

Signature Adoption: Pre-selected Style

Using IP Address: 74.174.59.10

Electronic Record and Signature Disclosure:

Accepted: 11/13/2017 10:07:14 AM

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

David Lowman

Completed

Sent: 10/8/2025 10:29:23 AM

david.lowman@fultoncountyga.gov

Viewed: 10/10/2025 5:11:59 AM

Security Level: Email, Account Authentication (None)

Signed: 10/10/2025 5:12:59 AM

Using IP Address: 67.191.186.172

Electronic Record and Signature Disclosure:

Accepted: 10/10/2025 5:11:59 AM

ID: cd494ea2-b291-403c-af7c-bfc6c3138dee

Kaye Burwell

Signed by:

kaye.burwell@fultoncountyga.gov

Kaye Burwell

Sent: 10/10/2025 5:13:00 AM

Deputy County Attorney

Viewed: 10/10/2025 8:49:27 AM

Security Level: Email, Account Authentication (None)

Signed: 10/10/2025 8:50:46 AM

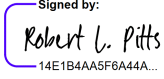
Signature Adoption: Pre-selected Style

Using IP Address: 104.129.206.71

Electronic Record and Signature Disclosure:

Accepted: 10/10/2025 8:49:27 AM

ID: bcbe9c-fd4c-450f-b5a4-291bbfb8f6a6

Signer Events	Signature	Timestamp
Nikki Peterson nikki.peterson@fultoncountyga.gov Chief Deputy Clerk to the Board of Commissioners Fulton County Government Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Accepted: 11/27/2017 10:39:37 AM ID: b7ce88ee-0c66-4f3a-bfee-705e0af602d8	Completed Using IP Address: 68.208.197.4	Sent: 10/10/2025 8:50:47 AM Viewed: 10/13/2025 7:29:14 AM Signed: 10/13/2025 7:29:48 AM
Robert L. Pitts harriet.thomas@fultoncountyga.gov Chairman Fulton County Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Accepted: 10/13/2025 7:41:46 AM ID: a90b79ff-23aa-4249-8521-6f9a11fd9741	Signed by:  14E1B4AA5F6A44A... Signature Adoption: Pre-selected Style Using IP Address: 74.174.59.10	Sent: 10/13/2025 7:29:50 AM Viewed: 10/13/2025 7:41:46 AM Signed: 10/13/2025 7:41:55 AM
Tonya Grier tonya.grier@fultoncountyga.gov Clerk to the Commission Fulton County Government Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Accepted: 3/16/2018 7:54:59 AM ID: f3f241e8-3027-4447-9476-6cf20ae25dd4	Signed by:  EEC476C4837648D...  Signature Adoption: Uploaded Signature Image Using IP Address: 2600:387:f:68::4 Signed using mobile	Sent: 10/13/2025 7:41:57 AM Viewed: 10/13/2025 7:44:02 AM Signed: 10/13/2025 7:44:34 AM
DARLENE BANKS darlene.banks@fultoncountyga.gov Assistant Purchasing Agent Fulton County Government Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via Docusign	Completed Using IP Address: 172.3.170.13	Sent: 10/13/2025 7:44:37 AM Viewed: 10/13/2025 10:00:41 AM Signed: 10/13/2025 10:01:19 AM

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

Carbon Copy Events	Status	Timestamp
Duane Petersen dpetersen@walshgroup.com President Walsh Construction Security Level: Email, Account Authentication (None), Login with SSO Electronic Record and Signature Disclosure: Accepted: 10/3/2025 10:54:23 AM ID: e363e92a-ce56-4685-be58-8f6276293195	COPIED	Sent: 10/2/2025 8:34:44 AM Resent: 10/8/2025 7:17:42 AM Viewed: 10/10/2025 9:55:47 AM
Rod Pope RPope@walshgroup.com Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign	COPIED	Sent: 10/8/2025 7:17:43 AM
Dian DeVaughn dian.devaughn@futoncountyga.gov Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign	COPIED	Sent: 10/13/2025 10:01:22 AM
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	10/2/2025 8:34:44 AM
Envelope Updated	Security Checked	10/8/2025 7:17:41 AM
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Envelope Updated	Security Checked	10/8/2025 7:17:42 AM
Certified Delivered	Security Checked	10/13/2025 10:00:41 AM
Signing Complete	Security Checked	10/13/2025 10:01:19 AM
Completed	Security Checked	10/13/2025 10:01:22 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

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