



CONTRACT RENEWAL AGREEMENT

DEPARTMENT: PUBLIC WORKS

BID/RFP# NUMBER: 23ITB137323A-KM

BID/RFP# TITLE: Laboratory Testing Services

ORIGINAL APPROVAL DATE: March 7, 2023

RENEWAL EFFECTIVE DATES: March 31, 2024 through December 31, 2024

RENEWAL OPTION #: 1 OF 2

NUMBER OF RENEWAL OPTIONS: 1

RENEWAL AMOUNT: \$100,000.00

COMPANY'S NAME: Eurofins Environmental Testing Southeast, LLC

ADDRESS: 3080 Presidential Drive

CITY: Atlanta

STATE: GA

ZIP: 30340

This Renewal Agreement No. 1 was approved by the Fulton County Board of Commissioners on BOC DATE: 6/5/2024 **BOC NUMBER:** 24-0371

SIGNATURES: SEE NEXT PAGE

SIGNATURES:

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

**EUROFINS ENVIRONMENT TESTING
SOUTHEAST, LLC**

DocuSigned by:

Robert L. Pitts

DocuSigned by:

Robert Dempsey

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

**Bob Dempsey
President**

ATTEST:

ATTEST:

DocuSigned by:

Tonya R. Grier

**Secretary/
Assistant Secretary**

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

(Affix County Seal)

(Affix Corporate Seal)

AUTHORIZATION OF RENEWAL:

ATTEST:

DocuSigned by:

David Clark

DocuSigned by:

Elizabeth Waddell

**David Clark, Director
Department of Public Works**

Notary Public

County: DeKalb

Commission Expires: March 02, 2028

(Affix Notary Seal)

DocuSigned by:



ITEM#: _____ RCS: _____	ITEM#: 24-0371 RM: 6/5/2024
RECESS MEETING	REGULAR MEETING



ASSIGNMENT AND ASSUMPTION AGREEMENT

This Assignment and Assumption Agreement is made effective January 1, 2024 (the "Effective Date") by and among Fulton County ("Client"); Analytical Environmental Services Inc. ("Assignor" or "AES"); and Eurofins Environment Testing Southeast, LLC ("Assignee" or "EETSE").

WHEREAS, Client and AES entered into an agreement for laboratory analytical services dated March 24, 2023 Contract Number **23ITB137323A-KM** Laboratory Testing Services for the Department of Public Works (hereinafter, the "Agreement"); and

WHEREAS, Eurofins Scientific Inc. purchased AES in January, 2024 pursuant to which EETSE has agreed to purchase the assets of AES with anticipated closing date of January 1, 2024; and

WHEREAS, AES now desires to transfer and assign all of its rights and interests in and to, and obligations under, the Agreement to Assignee effective as of the Effective Date listed above; and

WHEREAS, Assignee desires to accept all such rights, interests and obligations as the assignee and transferee; and

NOW, THEREFORE, in consideration of the mutual covenants and promises made by the parties to this Assignment and Assumption Agreement, Client, Assignor and Assignee hereby covenant and agree as follows:

1. **Assignment and Assumption.** Effective as of the Effective Date, Assignor hereby transfers and assigns the Agreement to Assignee, and Assignee hereby accepts the assignment of the Agreement by Assignor and acquires all of the rights, interests and obligations in and to the Agreement. Assignee hereby assumes the Agreement and agrees to perform all obligations, duties, liabilities and commitments of the Assignor under the Agreement, of whatever kind or nature. Client hereby consents to the assignment of the Agreement to Assignee.
2. **No Fee.** There shall be no fee payable to or by Assignor, Assignee, or Client with respect to the assignment of the Agreement.
3. **Governing Law.** This Assignment Agreement shall be governed by the laws of the State of Delaware applicable to contracts made and performed in that State without giving effect to that State's choice of law principles.
4. **Counterparts.** This Assignment Agreement may be executed in one or more counterparts, including electronic counterparts, each of which shall be deemed to be an original copy of this Assignment Agreement, and all of which, when taken together, shall be deemed to constitute one and the same agreement. Delivery of such counterparts by electronic means (in PDF or tiff format) shall be deemed effective as manual delivery.

[SIGNATURE PAGE FOLLOWS]




IN WITNESS WHEREOF, each of the Parties has executed this Assignment and Assumption Agreement by its respective duly authorized officer as of the Effective Date set forth in the first paragraph above.

CLIENT:

Signature
By: _____
Title: _____
Date: _____

ASSIGNOR:


Analytical Environmental Services Inc.



Signature
By: Andria Yildirim
Title: President
Date: _____ January 3, 2024 _____

ASSIGNEE:

Eurofins Environment Testing Southeast LLC



Signature
By: Bob Dempsey
Title: President
Date: _____ 2/29/2024 _____



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/24/2024

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 Marsh USA LLC 30 South 17th Street Philadelphia, PA 19103 CN134111012-ALL-GUPP-24-25	CONTACT NAME: PHONE (A/C, No, Ext): _____ FAX (A/C, No): _____ E-MAIL ADDRESS: _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;">INSURER(S) AFFORDING COVERAGE</th> <th style="width: 20%;">NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: ACE Property & Casualty Insurance Company</td> <td>20699</td> </tr> <tr> <td>INSURER B: Great Northern Insurance Company</td> <td>20303</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: ACE Property & Casualty Insurance Company	20699	INSURER B: Great Northern Insurance Company	20303	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A: ACE Property & Casualty Insurance Company	20699														
INSURER B: Great Northern Insurance Company	20303														
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															
INSURED Eurofins Environment Testing Southeast, LLC 3080 Presidential Drive Atlanta, GA 30340															

COVERAGES **CERTIFICATE NUMBER:** CLE-007237822-02 **REVISION NUMBER:** 3

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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: _____			OGLG46676725	01/01/2024	01/01/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 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 <input type="checkbox"/> 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 type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED _____ RETENTION \$ _____			XOO G46676762 002	01/01/2024	01/01/2025	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ _____
	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				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ _____ E.L. DISEASE - EA EMPLOYEE \$ _____ E.L. DISEASE - POLICY LIMIT \$ _____
B	Professional Liability			99510639	01/01/2024	01/01/2025	LIMITS: SEE ATTACHED DEDUCTIBLE: 250,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Re: Laboratory Testing Services.
 Certificate Holder is included as an additional insured, except Professional Liability, where required by written contract. Waiver of subrogation is applicable where required by written contract and subject to policy terms and conditions.

CERTIFICATE HOLDER Fulton County Government Attn: Purchasing Department 130 Peachtree Street, S.W. Suite 1168 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 <p style="text-align: right;"><i>Marsh USA LLC</i></p>
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ADDITIONAL REMARKS SCHEDULE

AGENCY Marsh USA LLC		NAMED INSURED Eurofins Environment Testing Southeast, LLC 3080 Presidential Drive Atlanta, GA 30340	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

Professional Liability:

- (a) Integrated Liability and Indemnity Aggregate Limit - \$5,000,000
- (b) Errors or Omissions Aggregate Limit - \$5,000,000
- (c) Contractually Assumed Privacy Remediation Limit - \$100,000
- (d) An occurrence limit does not exist on this policy, which essentially makes the occurrence limit \$5,000,000. The same as the aggregate limit.

Pollution Liability:

Policy # USL03044324
01/01/2024 - 01/01/2027
Fireman's Fund Indemnity Corporation
Limits:
Each Pollution Condition - \$5,000,000
Aggregate - \$5,000,000
SIR - \$100,000



**WORKERS COMPENSATION
AND
EMPLOYERS LIABILITY POLICY
ENDORSEMENT WC 00 03 13 (00) -**

POLICY NUMBER: UB-2R857672-24-I2-K

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit any one not named in the Schedule.

SCHEDULE

DESIGNATED PERSON:

DESIGNATED ORGANIZATION:

Any person or organization for which the insured has agreed by written contract executed prior to loss to furnish this waiver.

DATE OF ISSUE: 01-02-24

ST ASSIGN:



**WORKERS COMPENSATION
AND
EMPLOYERS LIABILITY POLICY
ENDORSEMENT WC 99 06 R3 (00)**

POLICY NUMBER: UB-2R857672-24-I2-K

**NOTICE OF CANCELLATION
TO DESIGNATED PERSONS OR ORGANIZATIONS**

The following is added to **PART SIX – CONDITIONS**:

Notice Of Cancellation To Designated Persons Or Organizations

If we cancel this policy for any reason other than non-payment of premium by you, we will provide notice of such cancellation to each person or organization designated in the Schedule below. We will mail or deliver such notice to each person or organization at its listed address at least the number of days shown for that person or organization before the cancellation is to take effect.

You are responsible for providing us with the information necessary to accurately complete the Schedule below. If we cannot mail or deliver a notice of cancellation to a designated person or organization because the name or address of such designated person or organization provided to us is not accurate or complete, we have no responsibility to mail, deliver or otherwise notify such designated person or organization of the cancellation.

SCHEDULE

Name and Address of Designated Persons or Organizations:	Number of Days Notice
AS PER WRITTEN CONTRACT	30



**WORKERS COMPENSATION
AND
EMPLOYERS LIABILITY POLICY
ENDORSEMENT WC 99 06 R3 (00)**

POLICY NUMBER: UB-2R857672-24-I2-K

Name and Address of Designated Persons or Organizations:

**Number of
Days Notice**



**WORKERS COMPENSATION
AND
EMPLOYERS LIABILITY POLICY
ENDORSEMENT WC 99 06 R3 (00)**

POLICY NUMBER: UB-2R857672-24-I2-K

Name and Address of Designated Persons or Organizations: **Number of
Days Notice**

All other terms and conditions of this policy remain unchanged.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective
Insured

Policy No.

Endorsement No.
Premium \$

Insurance Company

Countersigned by _____

Certificate Of Completion

Envelope Id: 7D56D674513646C383794EE81AEE3D9E	Status: Completed
Subject: 23ITB137323A-KM Renewal-Eurofins	
Parcel ID:	
Employee Name:	
Source Envelope:	
Document Pages: 11	Signatures: 5
Certificate Pages: 6	Initials: 0
AutoNav: Enabled	Stamps: 1
Envelopeld Stamping: Enabled	Envelope Originator:
Time Zone: (UTC-05:00) Eastern Time (US & Canada)	Keisha Massey
	141 Pryor Street
	Purchasing & Contract Compliance, Suite 1168
	Atlanta, GA 30303
	keisha.massey@fultoncountyga.gov
	IP Address: 73.7.0.173

Record Tracking

Status: Original 7/3/2024 2:49:07 PM	Holder: Keisha Massey keisha.massey@fultoncountyga.gov	Location: DocuSign
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Fulton County Government	Location: DocuSign

Signer Events

Robert Dempsey
 Robert.Dempsey@et.eurofinsus.com
 President
 Security Level: Email, Account Authentication (None)

Signature

DocuSigned by:



 2565CC1673F04E5...
 Signature Adoption: Pre-selected Style
 Using IP Address: 168.149.253.20

Timestamp

Sent: 7/3/2024 3:10:09 PM
 Viewed: 7/9/2024 7:41:39 AM
 Signed: 7/23/2024 8:47:38 AM

Electronic Record and Signature Disclosure:
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 ID: 94b6ed71-b849-439e-90fb-fe0e65bad0e7

Elizabeth Waddell
 Robert.Dempsey@et.eurofinsus.com
 President
 Security Level: Email, Account Authentication (None)

DocuSigned by:

 2565CC1673F04E5...

 Signature Adoption: Pre-selected Style
 Using IP Address: 12.201.98.197

Sent: 7/23/2024 8:47:40 AM
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 Signed: 7/24/2024 4:18:19 PM

Electronic Record and Signature Disclosure:
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 ID: 94b6ed71-b849-439e-90fb-fe0e65bad0e7

David Clark
 david.clark@fultoncountyga.gov
 Director
 Public Works
 Security Level: Email, Account Authentication (None)

DocuSigned by:

 65CE1C9FDD834B8...
 Signature Adoption: Pre-selected Style
 Using IP Address: 174.49.82.231
 Signed using mobile

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 Signed: 7/24/2024 6:45:36 PM

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

Signer Events	Signature	Timestamp
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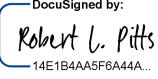
Nikki Peterson
nikki.peterson@fultoncountyga.gov
Chief Deputy Clerk to the Board of Commissioners
Fulton County Government
Security Level: Email, Account Authentication (None)

Completed
Using IP Address: 68.208.197.4

Sent: 7/24/2024 6:45:39 PM
Viewed: 7/25/2024 9:55:37 AM
Signed: 7/25/2024 9:58:25 AM

Electronic Record and Signature Disclosure:
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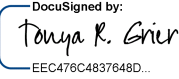
Robert L. Pitts
harriet.thomas@fultoncountyga.gov
Chairman
Security Level: Email, Account Authentication (None)

DocuSigned by:

14E1B4AA5F6A44A...
Signature Adoption: Pre-selected Style
Using IP Address: 68.208.197.4

Sent: 7/25/2024 9:58:28 AM
Viewed: 7/25/2024 3:23:48 PM
Signed: 7/25/2024 3:23:57 PM

Electronic Record and Signature Disclosure:
Accepted: 7/25/2024 3:23:48 PM
ID: 61ebc7af-ca7e-46ef-a7ba-1dbe1108f811

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

DocuSigned by:

EEC476C4837648D...
Signature Adoption: Pre-selected Style
Using IP Address: 99.96.24.191

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Viewed: 7/25/2024 3:35:28 PM
Signed: 7/25/2024 3:35:41 PM

Electronic Record and Signature Disclosure:
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ID: f3f241e8-3027-4447-9476-6cf20ae25dd4

In Person Signer Events	Signature	Timestamp
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Editor Delivery Events	Status	Timestamp
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Agent Delivery Events	Status	Timestamp
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Intermediary Delivery Events	Status	Timestamp
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Certified Delivery Events	Status	Timestamp
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Carbon Copy Events	Status	Timestamp
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Brian Jones
brian.jones@fultoncountyga.gov
Assistant Purchasing Agent
Fulton County Government
Security Level: Email, Account Authentication (None)

COPIED

Sent: 7/25/2024 3:35:44 PM

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Dian DeVaughn
Dian.DeVaughn@fultoncountyga.gov
Security Level: Email, Account Authentication (None)

COPIED

Sent: 7/25/2024 3:35:45 PM
Viewed: 7/25/2024 3:56:33 PM

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

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>	<div style="border: 2px solid blue; padding: 5px; display: inline-block; font-weight: bold; color: blue; font-size: 1.2em;">COPIED</div>	Sent: 7/25/2024 3:35:47 PM
<p>Shandha Read shandha.read@fultoncountyga.gov Security Level: Email, Account Authentication (None)</p> <p>Electronic Record and Signature Disclosure: Not Offered via DocuSign</p>	<div style="border: 2px solid blue; padding: 5px; display: inline-block; font-weight: bold; color: blue; font-size: 1.2em;">COPIED</div>	Sent: 7/25/2024 3:35:48 PM
<p>Keisha Massey keisha.massey@fultoncountyga.gov Procurement Officer Cintas Corporation Security Level: Email, Account Authentication (None)</p> <p>Electronic Record and Signature Disclosure: Not Offered via DocuSign</p>	<div style="border: 2px solid blue; padding: 5px; display: inline-block; font-weight: bold; color: blue; font-size: 1.2em;">COPIED</div>	<p>Sent: 7/25/2024 3:35:50 PM Resent: 7/25/2024 3:35:58 PM</p>
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
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Envelope Updated	Security Checked	7/24/2024 10:20:30 AM
Envelope Updated	Security Checked	7/24/2024 10:20:30 AM
Certified Delivered	Security Checked	7/25/2024 3:35:28 PM
Signing Complete	Security Checked	7/25/2024 3:35:41 PM
Completed	Security Checked	7/25/2024 3:35:50 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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