

DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

CONTRACT RENEWAL AGREEMENT

DEPARTMENT: Public Works BID/RFP NUMBER: 24ITB1302727A-KM BID/RFP TITLE: South Fulton Maintenance and Operational Demonstration Garden Landscape ORIGINAL APPROVAL DATE: September 23, 2024 RENEWAL EFFECTIVE DATES: January 1, 2026 through December 31, 2026 **RENEWAL OPTION #:** 2 OF 2 **NUMBER OF RENEWAL OPTIONS:** No renewal remains **RENEWAL AMOUNT: \$21,422.34** COMPANY'S NAME: Crabapple Turf Management, Inc. dba Crabapple LandscapEXPERTS ADDRESS: 1012 Union Center Drive **CITY:** Alpharetta STATE: GA **ZIP:** 30004 This Renewal Agreement No. ___ was approved by the Fulton County Board of Commissioners on BOC DATE: _____ BOC NUMBER: _____

CERTIFICATE OF INSURANCE: The Contractor/Vendor is required to maintain insurance during the entire term of this Agreement, including any contract renewals. Upon request, the Contractor/Vendor must furnish the County a Certificate of Insurance showing the required coverage as specified in the Contract Agreement and any renewals. A current COI must be provided before the commencement of work on this project under this Contract Renewal. The cancellation of any policy of insurance required by this Agreement shall meet the requirements of notice under the laws of the State of Georgia as presently set forth in the Georgia Code.

SIGNATURES: SEE NEXT PAGE

SIGNATURES:

Contractor/Vendor agrees to accept the renewal option and abide by the terms and conditions set forth in the contract and specifications as referenced herein:

FULTON COUNTY, GEORGIA	Crabapple LandscapEXPERTS
Robert L. Pitts, Chairman Fulton County Board of Commissioners	Penelope Hillard Director of Business Development
ATTEST:	ATTEST:
Tonya R. Grier Clerk to the Commission	Secretary/ Assistant Secretary
(Affix County Seal)	(Affix Corporate Seal)
AUTHORIZATION OF RENEWAL:	ATTEST:
David Clark, Director Public Works	Notary Public
	County:
	Commission Expires:
	(Affix Notary Seal)
ITEM#:RM:	ITEM#:2 nd RM:
REGULAR MEETING	SECOND REGULAR MEETING

CERTIFICATE OF INSURANCE