

AMENDMENT NO. 1 TO FORM OF CONTRACT

Contractor: ALLUSIONS DESIGN AND CONSTRUCTION

Contract No. 20RFQ123941A-CJC, Fulton County Housing Rehabilitation Program

Address: 920 Holcomb Bridge Road, Suite 150
City, State Roswell, GA 30076

Telephone: 678-777-5799

E-mail: sv@allusionsllc.com

Contact: Stephanie Gowdy
Chief Executive Officer

W I T N E S S E T H

WHEREAS, Fulton County ("County") entered into a Contract with Allusions Design and Construction to provide minor home repairs as part of the Community Development housing rehab program dated May 20, 2020, on behalf of the Community Development Department; and

WHEREAS, the purpose for amendment is to modify the existing contract by including senior home repair as part of the scope of work; and

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

WHEREAS, this amendment was approved by the Fulton County Board of Commissioners on [Insert Board of Commissioners approval date and item number].

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

This Amendment No. 1 to Form of Contract is effective as of the ____ day of _____, 20__, between the County and [Insert Contractor Name], who agree that all Services specified will be performed in accordance with this Amendment No. 1 to Form of Contract and the Contract Documents.

1. SCOPE OF WORK TO BE PERFORMED:

The Contractor shall manage, implement, and undertake home repairs under the Department of Senior Services - Senior Home Repair Program. The work will be done in-house or by hiring qualified Contractor(s), to make the home repairs. Contractor must be a licensed General Contractor(s). The General Contractor(s) must have experience in home repair services that are similar to the eligible repairs available under the Program and will

comply with the general requirements stated in the following sections.

- A. Older Americans Act: Eligibility - generally defined as 60 and older, it focuses on offering assistance to persons with the greatest social or economic need, such as low-income or minority persons, older individuals with limited English proficiency, and older persons residing in rural areas.
- B. Number of Beneficiaries: With general funds in the amount of \$192,591.50, it is anticipated that approximately 113 homes or more will be assisted (average \$1,700.00 per home).

There are other assistive home stabilizing options that will be assessed by the Department of Senior Services and referred to the contractor for delivery and placement.

The services will be categorized in the following manner; each repair will be marked as "Health" related, "Safety" related and/or both "Health & Safety" per the guidelines contained below.

- I. Safety
 - a. Structural (ceiling, walls, floors, doors, windows, and painting to provide sealing and protection from deterioration)
 - b. Electrical replacement of unsafe or defective wiring, replacement of conduits to permit installation of an emergency response unit; repair or replacement of essential appliances and replacement of light switches. Essential appliances are defined as those appliances necessary to sustain a healthful environment such as refrigeration, clothes washing and drying, heating, cooking and cooling.
- II. Safety and Security
 - a. Modification (measures which prevent accidents, fires or intrusion into a dwelling, examples are installation of a secure door and window locks, addition of exterior flood lights along access walls and installation of smoke detectors, fire escapes, emergency response or alarm systems.
- III. Health
 - a. Accessibility modification (installation of chair-lift, ramp, modifying thresholds; installing zero-step doorways; modifying appliance and electrical controls for easier manipulation; widening and installation of shower stalls, doorways; repair and replacement of and/or installation of grab bars and/or handrails.
- IV. Plumbing
 - a. Replacement, repair and/or installation of essential plumbing lines or fixtures such as bathtub, shower, kitchen and bathroom sinks, toilet, water heater, septic tanks, drain field or well).
- V. Health and Safety
 - a. Weatherization – repairs and/or modifications or purchase of supplies that protect the home or its resident(s) from the effects of the weather, conserve energy or provide alternative energy sources to heat or cool a dwelling. Examples are providing and installing storm windows, insulation, servicing

heating systems, "minor" roof repair and maintenance and installation of mobile home skirts.

- b. Home and Exterior Maintenance (repair or removal of safety hazards in yard, such as yard debris, fallen limbs, overgrown vegetation and replacement of window panes)

If pricing exceeds the approved repairs outlined in the scope of the work, the Contractor is expected to contact the Senior Services Department staff with an explanation and an estimated cost for the repairs, prior to performing work.

2. **COMPENSATION:** The services described under Scope of Work herein shall be performed by Contractor for a total amount not to exceed one hundred ninety-two thousand, five hundred ninety-one dollars and fifty cents \$192,591.50).
3. **LIABILITY OF COUNTY:** This Amendment No. 1 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 AMENDMENT NO. ___ TO FORM OF CONTRACT:** Except as modified by this Amendment No. ___ to Form of Contract, the Contract, and all Contract Documents, remain in full force and effect.

[INTENTIONALLY LEFT BLANK]

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

CONSULTANT:

**ALLUSIONS DESIGN AND
CONSTRUCTION**

Robert L. Pitts, Chairman
Fulton County Board of Commissioners

Stephanie Gowdy
Chief Executive Officer

ATTEST:

ATTEST:

Tonya R. Grier
Clerk to the Commission

Secretary/
Assistant Secretary

(Affix County Seal)

(Affix Corporate Seal)

APPROVED AS TO FORM:

ATTEST:

Office of the County Attorney

Notary Public

APPROVED AS TO CONTENT:

County: _____

Ladisa Onyiliogwu, Director
Department of Senior Services

Commission Expires: _____

(Affix Notary Seal)

ITEM#: _____ RCS: _____ RECESS MEETING	ITEM#: _____ RM: _____ REGULAR MEETING
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