



DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

CONTRACT RENEWAL AGREEMENT

DEPARTMENT: Real Estate and Asset Management

BID/RFP# NUMBER: 21ITB130447C-GS (B)

BID/RFP# TITLE: Janitorial Services for Selected Fulton County Facilities (Groups E, F, G, H & I)

ORIGINAL APPROVAL DATE: 3/2/2022

RENEWAL EFFECTIVE DATES: 1/ 1/ 2023 **THROUGH** 12/ 31/2023

RENEWAL OPTION #: 1 OF 2

NUMBER OF RENEWAL OPTIONS: 2

RENEWAL AMOUNT: \$261,756.00

COMPANY'S NAME: QCS Cleaning, Inc, dba Quality Cleaning Services, Inc.

ADDRESS: 6308 Linecrest Drive

CITY: Douglasville

STATE: GA

ZIP: 30134

This Renewal Agreement No. 1 was approved by the Fulton County Board of Commissioners on BOC DATE: 11/02/2022 BOC NUMBER: 22-0820

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: **Bid #21ITB130447C-GS (B)**

FULTON COUNTY, GEORGIA

DocuSigned by:

Robert L. Pitts

14F1B4AA5F6A44A

Robert L. Pitts, Chairman
Fulton County Board of Commissioners

QCS CLEANING, INC. DBA QUALITY CLEANING SERVICES, INC.

DocuSigned by:

Clifford Featherstone

8DEF3F64357944B

Clifford Featherstone
President/CEO

ATTEST:

DocuSigned by:

Tonya R. Grier

EEC476C4837648D

Tonya R. Grier
Clerk to the Commission

(Affix County Seal)

DocuSigned by:

**ATTEST:**

**Secretary/
 Assistant Secretary**

(Affix Corporate Seal)**AUTHORIZATION OF RENEWAL:**

DocuSigned by:

Joseph N. Davis

E45C5C5F17FB417...

Joseph N. Davis, Director
**Department of Real Estate and Asset
 Management**

ATTEST:

Jonathan Montgomery

Notary Public

County: Gwinnett

Commission Expires: November 24, 2023

(Affix Notary Seal) DocuSigned by:



ITEM#: _____ RCS: _____ RECESS MEETING	<div style="text-align: right;">2022-0820 11/2/2022</div> ITEM#: _____ RM: _____ REGULAR MEETING
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COUNTY MANAGER'S RENEWAL ACTION ITEMS**Open & Responsible Government****22-0820 Real Estate and Asset Management**

Request approval to renew existing contracts - Department of Real Estate and Asset Management, 21ITB130447C-GS, Janitorial Services for Selected Fulton County Facilities (Groups E, F, G, H & I) in an amount not to exceed \$1,036,470.00 with (A) Chi-Ada Corporation, (Atlanta, GA) in an amount not to exceed \$587,668.00; (B) Quality Cleaning Services, Inc. (Douglasville, GA) in an amount not to exceed \$261,756.00; and (C) American Facility Services, Inc. (Alpharetta, GA) in an amount not to exceed \$187,046.00, to provide the highest quality cleaning services for selected Fulton County facilities for Janitorial Groups E (South Libraries), F (Other Offices North & Other Offices South), G (South Senior Centers), H (Arts Centers) and I (North & South Service Centers). This action exercises the first of two renewal options. One renewal option remains. Effective dates: January 1, 2023 through December 31, 2023.

Health and Human Services**22-0821 Public Works**

Request approval to renew an existing contract - Department of Public Works, 21ITB000019A-CJC, Water Meter Reading in an amount not to exceed \$392,496.00 with Bermex, Inc. (Stow, OH) to provide water meter reading services. This action exercises the first of two renewal options. One renewal option remains. Effective dates: January 1, 2023, through December 31, 2023.

22-0822 Public Works

Request approval to renew existing contracts - Department of Public Works, 21ITB081321K-CRB, Standby Miscellaneous Construction Wastewater System Services in an total amount not to exceed \$12,700,000.00 with (A) Site Engineering, Inc. (Atlanta, GA) in an amount not to exceed \$3,300,000.00; (B) Wade Coots Company, Inc. (Austell, GA) in an amount not to exceed \$3,200,000.00; (C) Sol Construction, LLC (Atlanta, GA) in an amount not to exceed \$3,100,000.00; and, (D) Kemi Construction Company, Inc. (College Park, GA) in an amount not to exceed \$3,100,000.00 to provide standby miscellaneous construction wastewater system services. This action exercises the first of two renewal options. One renewal option remains. Effective dates: January 1, 2023 through December 31, 2023.

ACORD™ CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YY) 11/07/2022
PRODUCER King & French Insurance Agency, Inc. 2080-B Fairburn Road Douglasville, GA 30134 Phone: Fax:		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURED Quality Cleaning Services 6308 Linecrest Drive Douglasville, GA 30134		INSURERS AFFORDING COVERAGE INSURER A: Occidental Fire & Casualty of NC INSURER B: Westfield INSURER C: Western Surety INSURER D: Commercial Union-NCCI INSURER E:

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS		
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	BDR04122010	11/07/2022	12/31/2023	EACH OCCURRENCE	3,000,000	
					FIRE DAMAGE (Any one fire)	100,000	
					MEDICAL EXPENSE (Any one person)	5,000	
					PERSONAL & ADVERTISING INJURY	1,000,000	
					GENERAL AGGREGATE	3,000,000	
					PRODUCTS-COM/OP AGGREGATE	2,000,000	
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> <input type="checkbox"/>	CW3717849	11/07/2022	12/31/2023	COMBINED SINGLE LIMIT (Each accident)	1,000,000	
					BODILY INJURY (Per person)		
					BODILY INJURY (Per accident)		
					PROPERTY DAMAGE (Per accident)		
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> <input type="checkbox"/>				AUTO ONLY - EACH ACCIDENT		
					OTHER THAN AUTO ONLY:	EA. ACC.	
						AGG.	
C	EXCESS LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION	CW3717849	11/07/2022	12/31/2023	EACH OCCURRENCE	2,000,000	
					AGGREGATE		
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	MZ(98)H603185	11/07/2022	12/31/2023	<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER		
					E.L. EACH ACCIDENT	1,000,000	
					E.L. DISEASE - EACH EMPLOYEE	1,000,000	
					E.L. DISEASE - POLICY LIMIT	1,000,000	
	OTHER <input type="checkbox"/>						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

21ITB130447C-GS (B) Janitorial Services for Selected Fulton County Facilities (Group G South Senior Centers)

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

Fulton County Department of Purchasing & Contract Compliance
 130 Peachtree Street, S.W. Suite 1168
 Atlanta, GA 30303

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

CONTRACT RENEWAL AGREEMENT

DEPARTMENT: Real Estate and Asset Management

BID/RFP# NUMBER: 21ITB130447C-GS (C)

BID/RFP# TITLE: Janitorial Services for Selected Fulton County Facilities (Groups E, F, G, H & I)

ORIGINAL APPROVAL DATE: 3/2/2022

RENEWAL EFFECTIVE DATES: 1/ 1/ 2023 **THROUGH** 12/ 31/2023

RENEWAL OPTION #: 1 OF 2

NUMBER OF RENEWAL OPTIONS: 2

RENEWAL AMOUNT: \$187,046.00

COMPANY'S NAME: American Facility Services, Inc.

ADDRESS: 1325 Union Hill Industrial Court, Suite A

CITY: Alpharetta

STATE: GA

ZIP: 30004

This Renewal Agreement No. 1 was approved by the Fulton County Board of Commissioners on BOC DATE: 11/02/2022 BOC NUMBER: 22-0820

SIGNATURES: SEE NEXT PAGE

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FULTON COUNTY, GEORGIA

DocuSigned by:

Robert L. Pitts

14E1B4AA5F6A44A...

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

ATTEST:

DocuSigned by:

Tonya R. Grier

FEC476C4837648D

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

(Affix County Seal)



AUTHORIZATION OF RENEWAL:

DocuSigned by:

Joseph N. Davis

E45C5C5F17FB417...

**Joseph N. Davis, Director
Department of Real Estate and Asset
Management**

AMERICAN FACILITY SERVICES, INC.

DocuSigned by:

Kevin McCann

F75AE4DC6E12455...

**Kevin McCann
President**

ATTEST:

**Secretary/
Assistant Secretary**

(Affix Corporate Seal)

ATTEST:

Andrea Lorraine Nugent

Notary Public

County: Fulton

Commission Expires: 10/02/2023

(Affix Notary Seal)

DocuSigned by:



ITEM#: _____ RCS: _____ RECESS MEETING	2022-0820 ITEM#: _____ RM: _____ REGULAR MEETING
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COUNTY MANAGER'S RENEWAL ACTION ITEMS**Open & Responsible Government****22-0820 Real Estate and Asset Management**

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/19/2022

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 McGriff Insurance Services, Inc. 3400 Overton Park Drive SE Suite 300 Atlanta, GA 30339	CONTACT NAME: Vera Neville PHONE (A/C, No, Ext): 404 497-7500 FAX (A/C, No): E-MAIL ADDRESS: vneville@mcgriff.com
INSURER(S) AFFORDING COVERAGE	
INSURER A : Amerisure Insurance Company	
INSURER B : Amerisure Mutual Insurance Company	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
 American Facility Services, Inc.
 1325 Union Hill Ind Court
 Suite A
 Alpharetta, GA 30004

COVERAGES

CERTIFICATE NUMBER: W4YCKSWH

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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CPP 21145910201	05/19/2022	05/19/2023	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
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			CA 21145900201	05/19/2022	05/19/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$0			CU 21145920202	05/19/2022	05/19/2023	EACH OCCURRENCE \$ 9,000,000 AGGREGATE \$ 9,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	WC 21145890201	05/19/2022	05/19/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 \$ \$ \$ \$

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

211TB130447C-GS

The Certificate Holder is included as Additional Insured for General Liability, as required by written contract.

Waiver of Subrogation is in favor of the Additional Insured for the General Liability and Auto policies as required by written contract.

CERTIFICATE HOLDER

Fulton County
 Dept. of Purchasing and Contract Compliance
 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

AGENCY CUSTOMER ID: _____
LOC #: _____



ADDITIONAL REMARKS SCHEDULE

PRODUCER McGriff Insurance Services, Inc.		INSURED American Facility Services, Inc.	
POLICY NUMBER			
CARRIER	NAIC CODE	ISSUE DATE: 05/19/2022	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: _____ FORM TITLE: _____

CRIME
Policy Number: 8237-5917
Carrier: Federal Insurance Company
Effective Dates: 05/19/2022-05/19/2023

Limits of Liability:

Employee Theft Coverage: \$250,000

Premises Coverage: \$250,000

In Transit Coverage: \$250,000

Forgery Coverage: \$250,000

Computer Fraud Coverage: \$250,000

Funds Transfer Fraud Coverage: \$250,000

Money Order and Counterfeit Currency Fraud Coverage: \$250,000

Credit Card Fraud Coverage: \$250,000

Client Coverage: \$250,000

Expense Coverage: \$25,000

Retentions: \$5,000 on all except Expense Coverage- NONE