

**CONTRACT APPROVAL FORM**

RECEIVED  
CONTRACT MANAGEMENT  
2011 OCT 10 AM 11:00

(Contract Management Use only)  
**CONTRACT TRACKING NO.**  
Cm1492-AZ

**CONTRACTOR INFORMATION**

Name: BJ BARR'S PERSONAL SAFETY DEVICES  
Address: P.O. BOX 16539, JACKSONVILLE, FLORIDA 32245  
City State Zip  
Contractor's Administrator Name: JERRY BARR Title: OWNER, OPERATER  
Tel#: 904-642-4555 Fax#: \_\_\_\_\_ Email: Islandsecurity@bellsouth.net

**CONTRACT INFORMATION**

Contract Name: FIRE ALARM MONITORING AND FIRE ALARM INSPECTION SERVICES Contract Value: \$185.00  
Brief Description: SERVICES LOCATED AT HILLIARD BRANCH LIBRARY, 15821 CR 108, HILLIARD, FL., 32046

Contract Dates: From: OCT 2011 to SEPT, 2012 Status: XX New \_\_\_ Renew \_\_\_ Amend# \_\_\_ WA/Task Order  
How Procured: \_\_\_ Sole Source \_\_\_ Single Source \_\_\_ ITB \_\_\_ RFP \_\_\_ RFQ \_\_\_ Coop. \_\_\_ Other XX

**If Processing an Amendment:**

Contract #: \_\_\_\_\_ Increase Amount of Existing Contract: \_\_\_\_\_ No Increase \_\_\_\_\_  
New Contract Dates: \_\_\_\_\_ to \_\_\_\_\_ TOTAL OR AMENDMENT AMOUNT: \_\_\_\_\_

**APPROVALS PURSUANT TO NASSAU COUNTY PURCHASING POLICY, SECTION 6**

- |    |  |                |                        |
|----|--|----------------|------------------------|
| 1. | <u>[Signature]</u>                         | <u>9/20/11</u> | <u>01714571-534600</u> |
|    | Department Head Signature                  | Date           | Funding Source/Acct #  |
| 2. | <u>[Signature]</u>                         | <u>9/30/11</u> |                        |
|    | Contract Management                        | Date           |                        |
| 3. | <u>[Signature]</u>                         | <u>10-4-11</u> |                        |
|    | County Attorney (Approved as to form only) | Date           |                        |
| 4. | <u>[Signature]</u>                         | <u>10-6-11</u> |                        |
|    | Office of Management & Budget              | Date           |                        |

Comments: \_\_\_\_\_

**INTERIM COUNTY MANAGER - FINAL SIGNATURE APPROVAL**

[Signature] 10/7/11  
Ted Selby Date

RECEIVED  
CONTRACT MANAGEMENT  
2011 SEP 30 AM 10:13  
11 OCT - 11 PM 2:15

**RETURN ORIGINAL(S) TO CONTRACT MANAGEMENT FOR DISTRIBUTION AS FOLLOWS:**

- Original: Clerk's Services; Contractor (original or certified copy)
- Copy: Department
- Office of Management & Budget
- Contract Management
- Clerk Finance

**AMENDMENT NUMBER 2/SECOND EXTENSION TO THE  
AGREEMENT FOR FIRE ALARM MONITORING AND FIRE ALARM  
INSPECTION SERVICES AT HILLIARD BRANCH LIBRARY**

THIS ADDENDUM entered into this 7th day of October, 2011 by and between the **BOARD OF COUNTY COMMISSIONERS OF NASSAU COUNTY, FLORIDA**, a political subdivision of the State of Florida, (hereinafter referred to as "County") and **B.J. BARR'S PERSONAL SAFETY DEVICES dba ISLAND SECURITY**, P.O. Box 16539, Jacksonville, Florida 32245, (hereinafter referred to as "Vendor").

**WHEREAS**, the parties entered into an Agreement dated September 10, 2009 for fire alarm monitoring and annual fire alarm inspection services for Hilliard Branch Library; and

**WHEREAS**, the original agreement provided for an initial term beginning October 1, 2009 and ending September 30, 2010, and allowed for renewals of one year periods; and

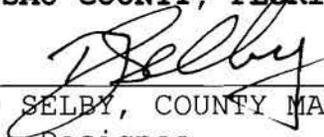
**WHEREAS**, the parties agreed to extend the agreement for a period beginning October 1, 2010 and ending September 30, 2011; and

**WHEREAS**, the parties desire to amend and extend said Agreement.

**NOW, THEREFORE, FOR AND IN CONSIDERATION** of the mutual covenants and agreements herein contained, the parties hereto agree as follows:

1. The performance period is hereby extended, at the same cost, for an additional one (1) year beginning October 1, 2011 and ending September 30, 2012.
2. All other provisions of said Agreement not in conflict with this Addendum shall remain in full force and effect.
3. Time is of the essence.

**BOARD OF COUNTY COMMISSIONERS  
NASSAU COUNTY, FLORIDA**

  
\_\_\_\_\_  
TED SELBY, COUNTY MANAGER  
Its. Designee

[SIGNATURES CONTINUE ON NEXT PAGE]

**B. J. BARR'S PERSONAL SAFETY DEVICES  
dba ISLAND SECURITY**

Robert Paton

By: \_\_\_\_\_  
Its: \_\_\_\_\_

STATE OF Florida  
COUNTY OF DADE

Before me personally appeared, Robert Paton,  
who is personally known \_\_\_\_\_ or produced  
Drivers License as identification, known to be the  
person described in and who executed the foregoing  
instrument, and acknowledged to and before me that he/she  
executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal, this 21 day of  
September, 2011.

[Signature]  
Notary Signature

Notary-Public-State of Florida at large  
My Commission expires: 6/29/2012

