

RECEIVED CONTRACT MANAGEMENT
CONTRACT APPROVAL FORM

(Contract Management Use only)
CONTRACT TRACKING NO.
Cm11659-A1

2011 NOV 30 AM 10:10

CONTRACTOR INFORMATION

Name: Medical Director - Nassau County Fire Rescue

Address: 2334 S. 8th Street, Fernandina Beach, Florida 32034

City State Zip
Contractor's Administrator Name: Farid Ullah Title: M.D.

Tel#: (904) 261-6135 Fax#: _____ Email: _____

RECEIVED
COUNTY CONTRACTORS
OFFICE
2011 DEC -7 PM 2:33

CONTRACT INFORMATION

Contract Name: Medical Director - Nassau County Fire Rescue Contract Value: \$ 20,907.00

Brief Description: See attachment (Services to be provided on a month to month basis)

Contract Dates: From 10-16-11 to 11-15-11 ^{month by month} Status: _____ New _____ Renew _____ Amend# _____ WA/Task Order

How Procured: _____ Sole Source _____ Single Source _____ ITB _____ RFP _____ RFQ _____ Coop. X Other Prof. Svcs.

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. [Signature] 11-29-11 01261526-531034
Department Head Signature Date Funding Source/Acct #
2. Charlotte Young 11-30-11
Contract Management Date
3. [Signature] 12-7-11
County Attorney (approved as to form only) Date
4. [Signature] 12-12-11
Office of Management & Budget Date

Comments: _____

COUNTY MANAGER - FINAL SIGNATURE APPROVAL

[Signature] 12/12/11
Ted Selby Date

RECEIVED
CONTRACT MANAGEMENT
2011 DEC 12 PM 2:11

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 1 TO THE CONTRACT FOR MEDICAL DIRECTOR SERVICES FOR BASIC LIFE SUPPORT AND ADVANCED LIFE SUPPORT

THIS AMENDMENT made and entered into this 12th day **December** of ~~XXXXXX~~ 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 **FARID ULLAH, M. D.** Advanced Life Support Medical Director, Basic Life Support (BLS), and Advanced Life Support (ALS) Medical Director, 2334 S. 8th Street, Fernandina Beach, Florida 32034, hereinafter referred to as "Medical Director".

WHEREAS, Section 401.265(1), Florida Statutes, requires that each basic life support transportation service or advanced life support service must contract with a medical director, and Chapter 64J-1.004(1), Florida Administrative Code, requires that each ALS or BLS provider shall maintain on file for inspection and copying by the Department of Health, its current contract for a medical director by which it employs or independently contracts with a physician qualified pursuant to this Section to be its medical director; and

WHEREAS, Section 401.265(1), Florida Statutes, requires that such medical director, who shall be a licensed physician, to supervise and accept responsibility for the medical performance of the emergency medical technicians and paramedics operating

for that emergency medical services system; and

WHEREAS, the parties entered into on October 1, 2010, a Contract for Medical Director Services for Basic Life Support and Advanced Life Support, which by its terms will expire October 15, 2011; and

WHEREAS, it has become necessary to amend the agreement entered into on October 1, 2010.

NOW THEREFORE, in consideration of the covenants hereinafter contained, it is mutually agreed between parties as follows:

1. Section 1 PAYMENTS will now read: For the services, duties, and facilities hereinafter provided and performed, the County agrees to pay to the Medical Director a monthly retainer equal to the sum of \$1,742.25.*
2. Section 4a INSURANCE AND INDEMNIFICATION will now read: The Medical Director shall at all times be covered by professional liability insurance for his work performed under this Agreement in an amount of not less than \$500,000.00/\$1,000,000.00 per person, no aggregate, unless otherwise approved by the County, which shall be paid for by the County, in the amount of \$4,567.65 for the coverage period October 15, 2011 through October 15, 2012.
3. Section 6 TERM shall now read: The initial term of this Agreement shall begin on the 16th

day of October, 2010 and end on the 15th day of October, 2011. The Contract shall automatically thereafter extend for successive additional one (1) month increments unless or until one of the undersigned parties notify the other of their desire to terminate the Contract by providing thirty (30) days written notice.

- 4. All other provisions of said Contract not in conflict with this Amendment shall remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have hereunto set their hands and seal on the day and year first above written.

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



TED SELBY, COUNTY MANAGER
Its: Designee

MEDICAL DIRECTOR

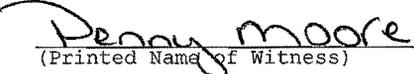


FARID ULLAH

Signed, Sealed, and Delivered
in the Presence of:



Witness Signature



(Printed Name of Witness)