

CS-21-075

Agreement/Contract: CM2261-AR6

Renewal of Natural Gas Services Agreement for Animal Services

This letter confirms the renewal of the Agreement/Contract on the terms set out below.

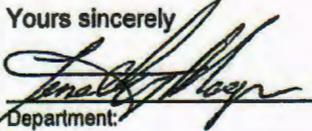
General information

No.	Topic	Details
1	Department	Name: Animal Services
2	Vendor	Name: Florida Public Utilities Company
3	Agreement/Contract	Agreement/Contract title: Natural Gas Services Agreement & Sales Contract Agreement/Contract tracking number: CM2261-AR6 Funding Account(s): 04621562-543000 Amount: \$33.00 per month; plus usage

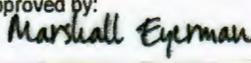
Agreement/Contract Renewal

On behalf of the Nassau County Board of County Commissioners, the Department gives notice of automatic renewal on 10/05/2021 and ending on 10/04/2022 in accordance with the terms of the Agreement/Contract.

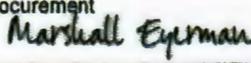
Yours sincerely


Department:

10/06/2021
Date

Approved by:


11/2/2021
Date

Procurement


11/3/2021
Date

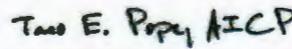
Office of Management & Budget


11/7/2021
Date

County Attorney

Date

COUNTY MANAGER - FINAL SIGNATURE APPROVAL


Taco E. Pope, AICP, County Manager

11/7/2021
Date



Company ID Number: 1251293

Information Required for the E-Verify Program	
Information relating to your Company:	
Company Name	Chesapeake Utilities Corporation
Company Facility Address	909 Silver Lake Boulevard Dover, DE 19904
Company Alternate Address	
County or Parish	KENT
Employer Identification Number	510064146
North American Industry Classification Systems Code	221
Parent Company	
Number of Employees	1,000 to 2,499
Number of Sites Verified for	10 site(s)



Company ID Number: 1251293

may subject the Web Services Employer, its subcontractors, its employees, or its representatives to: (1) prosecution for false statements pursuant to 18 U.S.C. 1001 and/or; (2) immediate termination of its MOU and/or; (3) possible debarment or suspension.

G. The foregoing constitutes the full agreement on this subject between DHS and the Web Services Employer.

Approved by:

Web Services Employer	
Chesapeake Utilities Corporation	
Name (Please Type or Print) Julie E StClair	Title
Signature Electronically Signed	Date 12/01/2017
Department of Homeland Security – Verification Division	
Name (Please Type or Print) USCIS Verification Division	Title
Signature Electronically Signed	Date 12/08/2017