BOCC CONTRACT APPROVAL FORM

(Request for Contract Preparation)

0-21-10	09
CONTRACT TRACKING NO.	

CM2673-A6

GENERAL INFORMATION Requesting Department: Planning Department
Contact Person: Gabriel Quintas, Assistant Planning Director
Telephone: (904) 530-6320 Fax: () Email: gquintas@nassaucountyfl.com
CONTRACTOR INFORMATION Name: Halff Associates, Inc.
Address: 6621 Southpoint Drive North, Suite 300, Jacksonville FL 32216
Contractor's Administrator Name: Joseph P. Loretta, PLA Title: Director of Landscape Architecture
Telephone: (904) 441-8365 Fax: () Email: jLoretta@Halff.com: tHorn@Halff.com
Authorized Signatory Email: jLoretta@Halff.com CONTRACT INFORMATION
Contract Name: Professional Services Agreement for Nassau County
Description: Sixth amendment to the professional services agreement for Arborist services extending the performance period and adding updated fee schedule. GOODS AND/OR SERVICES TO BE PROCURED, PHYSICAL LOCATION, ETC
Total Amount of Contract: NTE \$41,300.00 (\$23,141.50 left) APPROXIMATE IF NECESSARY
Source of Funds: ⊠ County □ State □ Federal □ Other Account: 04247515-531025
Authorized Signatory: Taco E. Pope, AICP IDENTIFY WHO WILL SIGN CONTRACT ON BEHALF OF BOCC
Contract Dates: From: 04/11/2019 to: 4/11/2023 Termination/Cancellation:
Status: ☐ New ☐ Renew ☐ Amend#6 ☐ WA/Task Order ☐ Supplemental Agreement
How Procured: ⊠ Exemption □ Sole Source □ Single Source □ ITB □ RFP □ RFQ □ Coop □ Piggyback □ Quotes □ Other
If Processing an Amendment: Contract #: CM2673
New Contract Dates: 04/11/2019 to 04/10/24 Total or Amended Amount: NTE \$41,300.00

Continued on next page

Other Necessary Agreements All other necessary agreements or waivers referred to in contract have been obtained and are attached and properly identified for reference. BOCC may not indemnify, hold harmless, be liable to, or reimburse any other part to the contract for claims, lawsuits, damages, attorney fees, or losses incurred by that party in connection with the contract.	Complete By Dept LG Dept LG Dept LG Dept LG Dept LG
including exhibits and appendices are attached (including E-Verify, Pricing, Scope, etc.) and properly identified; and 2) All such documents have been read and agreed to in their entirety by originating department and staff members who have obligations under this contract. Name, Address, Contact Person Understanding Written contract matches the verbal understanding of all parties. All terms and conditions conform to the final negotiations/agreement of the parties. Competition/Conflicts and Existing Contracts/Compliance Other Necessary Agreements All other necessary agreements or waivers referred to in contract have been obtained and are attached and properly identified for reference. BOCC may not indemnify, hold harmless, be liable to, or reimburse any other part to the contract for claims, lawsuits, damages, attorney fees, or losses incurred by that party in connection with the contract.	t Dept LG Dept
Contact Person Understanding Written contract matches the verbal understanding of all parties. All terms and conditions conform to the final negotiations/agreement of the parties. Competition/Conflicts and Existing Contracts/Compliance Contracts/Compliance Other Necessary Agreements All other necessary agreements or waivers referred to in contract have been obtained and are attached and properly identified for reference. BOCC may not indemnify, hold harmless, be liable to, or reimburse any other part to the contract for claims, lawsuits, damages, attorney fees, or losses incurred by that party in connection with the contract.	LG Dept
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and Existing Contracts/Compliance Other Necessary Agreements All other necessary agreements or waivers referred to in contract have been obtained and are attached and properly identified for reference. BOCC may not indemnify, hold harmless, be liable to, or reimburse any other part to the contract for claims, lawsuits, damages, attorney fees, or losses incurred by that party in connection with the contract.	
Agreements obtained and are attached and properly identified for reference. BOCC may not indemnify, hold harmless, be liable to, or reimburse any other par to the contract for claims, lawsuits, damages, attorney fees, or losses incurred by that party in connection with the contract.	f Dept LG Cnty Atty
to the contract for claims, lawsuits, damages, attorney fees, or losses incurred by that party in connection with the contract.	Cnty Atty
Term of Contract Start and end dates of contract are included. Any renewals are included.	ty Cnty Atty
	Cnty Atty
Warranties/Guarantees Warranties or guarantees give satisfactory protection.	Cnty Atty/Risk
Insurance Risk manager has or will approve insurance clauses. Levels confirmed in requirements	Dept LG
Governing Law The contract is governed under the laws of the State of Florida. The contract may silent on this issue but in no event will another state's law govern the agreement.	be Cnty Atty
Confidentiality Agreements All nondisclosure clauses include exceptions regarding disclosure as required by law. If not applicable, indicate "n/a."	Cnty Atty
Printed/Typed Names Names of all persons signing contracts are printed or typed below signatures.	

APPROVALS PURSUANT TO NASSAU COUNTY PURCHASING POLICY 1. Solveniment Head/Contract Manager 2. Date 4/3/2023 Date 3. 15. 23 3/31/2023

Office of Menu & Budget Date
4/3/2023

County Attorney Date

COUNTY	MANAGER -	-FINAL	SIGNATU	JRE A	PPROV	AL
1705						

5.	Taco E. Pope, AICP	4/3/2023
	County Manager	Date

4.

SIXTH AMENDMENT TO THE PROFESSIONAL SERVICES AGREEMENT FOR NASSAU COUNTY, FLORIDA

THIS AMENDMENT made and entered into this ______ day of _______, 2023 by and between the Board of County Commissioners of Nassau County, Florida, a political subdivision of the State of Florida, hereinafter referred to as the "County", and Halff Associates, Inc., a For Profit Corporation, whose Florida office address is located at 6621 Southpoint Drive, Suite 300, Jacksonville, Florida 32216, hereinafter referred to as "Consultant".

WHEREAS, on or about April 11, 2019, the County entered into the Professional Services Agreement for Nassau County, Florida with Genesis Halff, Inc. under which Genesis Half, Inc. provided professional services to the Nassau County Planning Department, hereinafter referred to as the "Agreement"; and

WHEREAS, on December 18, 2019, the County was notified of the merger of Genesis Halff, Inc. into its parent company Halff Associates, Inc.; and

WHEREAS, on February 14, 2020, the parties entered into the First Amendment to the Agreement for Professional Services to account for the merger; and

WHEREAS, the Agreement provided for an initial performance period beginning on the date of its execution (April 11, 2019) and ending twelve (12) months thereafter (April 10, 2020) with

Contract Tracking No.: CM2673-A6

the option to extend the performance period, at the County's sole discretion, in one (1) year increments upon mutual written agreement between both parties; and

WHEREAS, by way of previously executed Amendments by both parties, the performance period of the Agreement was extended for additional one (1) year periods with the most recent beginning April 11, 2022 and ending April 10, 2023; and

WHEREAS, by way of previously executed Amendments, the parties also agreed to increase the Not to Exceed amount of compensation as referenced in the Agreement from \$9,300.00 to \$41,300.00; and

WHEREAS, the parties now desire to extend the performance period of the Agreement for an additional one (1) year period beginning April 11, 2023 and ending April 10, 2024; and

WHEREAS, to coincide with the extension of the performance period, the Consultant has requested to revise the Standardly Hourly Rate Schedule, attached to the Agreement as Attachment "B", to increase the hourly rates as depicted in the 2023 Halff Billing Rates, attached to this Amendment as Exhibit "A"; and

WHEREAS, the County has determined the Consultant's request to be reasonable and to be in the best interest of Nassau County.

Contract Tracking No.: CM2673-A6

NOW, THEREFORE, and in consideration of the promises and

mutual covenants and understanding contained herein, the parties

hereto do mutually agree as follows:

1. The Agreement shall be amended to extend the performance

period for an additional one (1) year period beginning

April 11, 2023 through April 10, 2024.

2. The Agreement shall be amended to replace the original

Attachment "B", Standard Hourly Rate Schedule, with the

2023 Halff Billing Rates, attached hereto as Exhibit "A".

3. All other provisions of the Agreement not in conflict

with this Amendment shall remain in full force and

effect.

NASSAU COUNTY, FLORIDA

Taco E. Pope, AICP

By: Taco E. Pope, AICP

Its: Designee

Approved as to form and legality by the Nassau County Attorney

Derise C. May

DENISE C. MAY

Contract Tracking No.: CM2673-A6

Halff Associates, Inc.

By: Joseph Loretta

Its: Director of Landscape Architecture

Date: 4/3/2023

iii halff

Exhibit A

2023 Halff Billing Rates

Tabas Consulta	The state of the s	100	Billing Rate Range		
Labor Category	Title	Level	Low	High	
	Graduate Architect	1	99.00	100.00	
	Project Architect	II .	111.00	128.00	
Architect	Professional Architect	III	153.00	189.00	
	Sr. Professional Architect	IV	207.00	223.00	
	Team Leader / Director	V	265.00	349.00	
	Graduate Engineer	1	109.00	123.00	
	Project Engineer	11	122.00	158.00	
Engineer	Professional Engineer	III	157.00	206.00	
	Sr. Professional Engineer	IV	207.00	276.00	
	Team Leader / Director	V	262.00	350.00	
	Graduate Scientist	1	77.00	97.00	
	Project Scientist	11	112.00	141.00	
Scientist	Professional Scientist	10)	144.00	185.00	
	Sr. Professional Scientist	IV	199.00	233.00	
	Team Leader / Director	V	248.00	350.00	
	Graduate Designer	1	87.00	97.00	
	Project Designer	11	97.00	131.00	
Landscape/	Professional LA / Planner	111	134.00	166.00	
Planner	Sr. Professional LA /	IV	165.00	224.00	
	Team Leader / Director	V	223.00	350.00	
	Graduate Designer	1	103.00	104.00	
	Project Designer	11	113.00	133.00	
Surveyor	Professional LA / Planner	111	139.00	155.00	
,	Sr. Profesional LA / Planner	IV	157.00	200.00	
	Team Leader / Director	V	207.00	332.00	



	Junior Field Tech	1	58.00	75.00
	Field Tech	11	75.00	96.00
Field Tech	Professional Field Tech	111	96.00	123.00
	Sr. Field Tech	IV	124.00	158.00
	Team Leader / Director	V	202.00	209.00
	Junior Office Tech	1	60.00	75.00
	Office Tech	II.	75.00	95.00
Office Tech	Professional Office Tech	111	96.00	122.00
	Sr. Office Tech	IV	124.00	158.00
	Team Leader / Director	V	160.00	263.00
	Junior Admin	1	34.00	70.00
	Admin	11	75.00	96.00
Administrative	Professional Admin	111	97.00	123.00
	Sr. Admin	IV	118.00	156.00
	Director	V	157.00	350.00
Intern			55.00	90.00

Reimbursable expenses:

Reimbursable expenses will be billed at direct cost. Examples of reimbursable expenses included the following:

Courier Service

Government Permitting Fees

Maps / GIS Data

Prints, Copies, Plots, Plans

Mileage, Parking, Tolls

Subconsultant Fees

Postage and Overnight Mail

Travel (lodging, rental car, per diem)

ACORD.

Client#: 98667

HALFASSO

CERTIFICATE OF LIABILITY INSURANCE

7/19/2022

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	Rebecca Egan			
Greyling Ins. Brokerage/EPIC	PHONE (A/C, No, Ext): 770-670-5355 (A/C, No):			
3780 Mansell Road, Suite 370	E-MAIL ADDRESS: rebecca.egan@greyling.com			
Alpharetta, GA 30022	INSURER(S) AFFORDING COVERAGE	NAIC#		
	INSURER A: National Union Fire Ins. Co.	19445		
INSURED	INSURER B : The Continental Insurance Company 35289			
Halff Associates, Inc. 1201 N. Bowser Richardson, TX 75081	INSURER C : New Hampshire Ins. Co.	23841		
	INSURER D : Allied World Surplus Lines Ins	24319		
	INSURER E :			
	INSURER F:			

COVERAGES

CERTIFICATE NUMBER: 22-23

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,

NSR TR	TYPE OF INSURANCE	ADDL SUB	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS	3
A	X COMMERCIAL GENERAL LIABILITY		GL5856923		08/01/2023	EACH OCCURRENCE	\$2,000,000
	CLAIMS-MADE X OCCUR				The second secon	DAMAGE TO RENTED PREMISES (Es occurrence)	s 500,000
						MED EXP (Any one person)	s 25,000
						PERSONAL & ADV INJURY	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$4,000,000
	POLICY X PRO-					PRODUCTS - COMP/OP AGG	\$4,000,000
	OTHER:						\$
A	AUTOMOBILE LIABILITY		CA5717893	08/01/2022	08/01/2023	COMBINED SINGLE LIMIT (Ea acodent)	\$2,000,000
	X ANY AUTO				3	BOOILY INJURY (Per person)	S
	OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	5
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
	ADTOS GIALT					and the second s	S
В	X UMBRELLA LIAB X OCCUR		7034027549	08/01/2022	08/01/2023	EACH OCCURRENCE	s5,000,000
	EXCESS LIAB CLAIMS-N	ADE				AGGREGATE	s5,000,000
	DED X RETENTION \$10,000						\$
C	WORKERS COMPENSATION		WC014195843	08/01/2022	08/01/2023	X PER OTH-	
	ANY PROPRIETOR/PARTNER/EXECUTIVE					E.L. EACH ACCIDENT	\$1,000,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?					E.L. DISEASE - EA EMPLOYEE	s1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$1,000,000
D	Professional		03113813	08/01/2022	08/01/2023		
	Liability incl.					Aggregate \$3,000,00	00
	Poliution						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Re: For all Nassau County Contracts. Should any of the above described policies be cancelled by the issuing insurer before the expiration date thereof, 30 days' written notice (except 10 days for nonpayment of premium) will be provided to the Certificate Holder. The above referenced liability policies with the exception of workers compensation and professional liability are primary & non-contributory where required by written contract. Nassau County Board of County Commissioners are named as Additional Insureds on the (See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION
Nassau County Board of County Commissioners 96161 Nassau Place	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Yules, FL 32097-0000	AUTHORIZED REPRESENTATIVE
	wald come

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DESCRIPTIONS (Continued from Page 1) above referenced liability policies with the exception of workers compensation & professional liability where required by written contract. Waiver of Subrogation in favor of Additional Insured(s) where required by written contract & allowed by law.

POLICY NUMBER: GL5856923

COMMERCIAL GENERAL LIABILITY CG 20 10 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
Any person or organization where required by written contract provided that such contract was executed prior to the date of loss.	All Locations as required per written contract.

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
 - 1. Your acts or omissions; or
 - The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

- All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
- 2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

C. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

POLICY NUMBER: GL5856923

COMMERCIAL GENERAL LIABILITY CG 20 37 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
Any person or organization where required by written contract provided that such contract was executed prior to the date of loss.	All Locations as required per written contract.
Information required to complete this Schedule, if not sh	own above will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

DATE 3/9/2023

Requisition Form

NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS 96135 Nassau Place Suite I

VENDOR NAME/ADDRESS Halff Associates, Inc. 6621 Southpoint Drive North, #300 Jacksonville, FL 32216 Yulee, FL 32097

DEPARTMENT Planning

Clerk Date ____

	sonville, FL 32216	7					The second secon	e Goltry
OR NUMBER	PROJECT NAME	FUNDING SOURCE		AMOUNT AVAILABLE		STANDARD	PO OR ENCUMBER ONL	
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NO	DESCRIPTION		QUANTITY	UNIT PRICE	AMOUNT			
	CM2673-A6 to renew expiring contract		1.00	\$ 23,141.50	\$ 23,141.	50	This amount is for contract.	unds left on this
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Office of Mana	gement and Budget (signature re	quired it aver Depar	tment ffe	ad signature author	yity or \$5,000, w	hichever i	s less)	
I allest that, to the best of my knowledge, funds are available for CUNS CACAMBYA		available for paymer	/2023	//		/2023		
Procurement [Director (signature required it over the based on knowledge, this requi	er Department Head	signature	authority or \$5,000	0, whichever is l	ess.)	hasing Policy	



Certificate Of Completion

Envelope Id: 870AB173EFD7475FA55131EA7EA6D0B6

Subject: CM2673-A6 Halff Associates, Inc., Contract Amendment

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Document Pages: 14 Signatures: 11 Certificate Pages: 6 Initials: 3

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Time Zone: (UTC-05:00) Eastern Time (US & Canada)

Record Tracking

Status: Original

3/30/2023 1:59:03 PM

Signer Events

Holly Coyle hcoyle@nassaucountyfl.com

Security Level: Email, Account Authentication

(None)

Electronic Record and Signature Disclosure:

Accepted: 6/11/2021 9:00:57 AM ID: 5f065b75-a125-42eb-8c78-804d94a035f8

Tracy Poore

tpoore@nassaucountyfl.com

OMB Admin

Nassau County BOCC

Security Level: Email, Account Authentication

(None)

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

chris lacambra

clacambra@nassaucountyfl.com

OMB Director

Nassau County BOCC

Security Level: Email, Account Authentication

(None)

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

Lanaee Gilmore

lgilmore@nassaucountyfl.com

Procurement Director Nassau County BOCC

Security Level: Email, Account Authentication

(None)

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

Status: Completed

Envelope Originator:

Laurie Goltry

Igoltry@nassaucountyfl.com IP Address: 50.238.237.26

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Signature Adoption: Pre-selected Style

Signature Adoption: Pre-selected Style

Using IP Address: 50.238.237.26

Holder: Laurie Goltry

Signature

Holly Coyle

12

igoltry@nassaucountyfl.com

Signature Adoption: Pre-selected Style Using IP Address: 50.238.237.26

Signature Adoption: Pre-selected Style

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cluris lacambra

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Sent: 4/2/2023 3:34:37 PM Viewed: 4/3/2023 9:29:16 AM

Signed: 4/3/2023 9:29:57 AM

Signer Events **Signature Timestamp** Abigail Jorandby Sent: 4/3/2023 9:30:00 AM 11 ajorandby@nassaucountyfl.com Viewed: 4/3/2023 9:44:30 AM Assistant County Attorney Signed: 4/3/2023 9:44:39 AM Nassau BOCC Signature Adoption: Pre-selected Style Security Level: Email, Account Authentication Using IP Address: 50.238.237.26 (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign Joseph Loretta Sent: 4/3/2023 9:44:40 AM jLoretta@Halff.com Viewed: 4/3/2023 4:43:56 PM Director of Landscape Architecture Signed: 4/3/2023 4:44:18 PM Security Level: Email, Account Authentication Signature Adoption: Drawn on Device (None) Using IP Address: 65.57.159.19 Electronic Record and Signature Disclosure: Accepted: 4/3/2023 4:43:56 PM ID: 1f5611df-d965-4482-8a34-8a76e64d19c7 Denise C. May Sent: 4/3/2023 4:44:20 PM Denise C. May dmay@nassaucountyfl.com Viewed: 4/3/2023 4:56:03 PM Assistant County Attorney Signed: 4/3/2023 4:56:34 PM Nassau County BOCC Signature Adoption: Pre-selected Style Security Level: Email, Account Authentication Using IP Address: 50.238.237.26 (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign Taco E. Pope, AICP Sent: 4/3/2023 4:56:36 PM Taco E. Pope, AICP tpcpe@nassaucountyfl.com Viewed: 4/3/2023 5:06:35 PM County Manager Signed: 4/3/2023 5:06:48 PM Nassau County BOCC Signature Adoption: Pre-selected Style Security Level: Email, Account Authentication Using IP Address: 50.238.237.26 (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign In Person Signer Events Signature **Timestamp Editor Delivery Events** Status **Timestamp** Agent Delivery Events **Status Timestamp** Intermediary Delivery Events **Status Timestamp Certified Delivery Events Status Timestamp** Carbon Copy Events **Status Timestamp** Clerk Admin Sent: 4/3/2023 5:06:49 PM COPIED

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clerkservices@nassaucountyfl.com

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Procurement Staff

Witness Events

BOCCProcurement@nassaucountyfl.com Security Level: Email, Account Authentication

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Signature	Limestamb

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Envelope Summary Events Timestamps Status

Envelope Sent Hashed/Encrypted

4/3/2023 5:06:35 PM Certified Delivered Security Checked Security Checked 4/3/2023 5:06:48 PM Signing Complete 4/3/2023 5:06:51 PM Security Checked Completed

Timestamps Payment Events Status

Electronic Record and Signature Disclosure

Electronic Record and Signature Disclosure created on: 1/26/2021 7:14:58 AM

Parties agreed to: Holly Coyle, Joseph Loretta

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Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact County of Nassau:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: bsimmons@nassaucountyfl.com

To advise County of Nassau of your new email address

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at bsimmons@nassaucountyfl.com and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

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i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;

ii. send us an email to bsimmons@nassaucountyfl.com and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

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The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: https://support.docusign.com/guides/signer-guide-signing-system-requirements.

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To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

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- You can access and read this Electronic Record and Signature Disclosure; and
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 exclusively through electronic means all notices, disclosures, authorizations,
 acknowledgements, and other documents that are required to be provided or made
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 of Nassau.