



FULTON COUNTY PURCHASING DEPARTMENT

REQUEST FOR QUOTE NUMBER: 0758941YB-MW

WILL BE RECEIVED UNTIL Monday, November 19, 2007 AT 2:00 P.M.

DESCRIPTION: CYTOLOGY SERVICES FOR WOMEN – HEALTH & WELLNESS

For a quicker response, respond on-line at: www.fultonvendoreselfservice.com

Or via Fax at: (404) 893-1733

Buyer: Mae Wesley

Fulton County Purchasing Department
Public Safety Building, Suite 1168
130 Peachtree Street, S.W.
Atlanta, Georgia 30303
(404) 730-5800

Any questions regarding purchasing procedures or the specifications should be addressed only to the purchasing contact person listed below. Bidders may not have contact with county officers, elected officials or county employees regarding this bid prior to award of purchase order. Violation of this instruction will result in your bid being found non-responsive.

CONTACT NAME:

Mae Wesley

E-Mail Address :

mae.wesley@fultoncountyga.gov

Telephone Number:

(404) 730-5814

All information requested on this sheet must be completed. The signature block and related information on each quote sheet must also be completed. Unless specifications indicate "NO SUBSTITUTE", items determined by Fulton County to be "EQUAL OR BETTER" will be given full consideration. All prices QUOTED must be "FOB DELIVERED" unless otherwise requested, and must be submitted in the format requested. The County reserves the right to cancel the solicitation and to reject any or all quotes in whole or in part and is not bound to accept any quote if rejection of that quote is determined to be contrary to the best interest of the County.

Company Name:

Company Address:

City:

State:

Zip Code:

Telephone Number:

Fax Number:

E-Mail Address:

Responses must be delivered to the purchasing office by the date indicated.

Person submitting QUOTE: (Please Print)

Date:

Title:

***Signature of the person submitting QUOTE:**

*This person has binding authority to sign contracts on behalf of the responding company. By signing this form and all attachments, vendor agrees that their quote is an offer to sell. All bidders shall comply with all Fulton County purchasing laws, policies, and procedures, as well as relevant state and federal laws—including compliance with EEOC hiring guidelines and requirements under the Americans with Disabilities Act.

NO BID:

REASON: _____

**REQUEST FOR QUOTE
GENERAL TERMS AND CONDITIONS**

The following provisions are hereby made a part of this Request for Quote. Any contract or purchase order awarded as the result of this request shall be governed by these General Terms and Conditions. By signature in the space provided for vendor in these documents, vendor agrees to furnish the product(s) and/or service(s) pursuant to these conditions. The signed form must be submitted with your bid. Failure to do so may result in your bid being found non-responsive.

1. **GENERAL:** These provisions are standard for all County contracts. The County may delete or modify any of these standard provisions for a particular contract or purchase order by indicating a change in the special instructions or provisions. **Any vendor accepting a purchase order award as the result of this request agrees that the provisions included within this Request for Quote shall prevail over any conflicting provision within any standard form contract of the vendor.**
2. **SUBMISSION OF RESPONSES:** Responses may be submitted for quotes on the Vendor Self Service system at www.fultonvendorservice.co.ga.us, fax, or in person. Responses must be delivered to the Purchasing Office by the date indicated on the Request for Quote cover sheet. Quotes will be received until 2:00 p.m. on the date indicated. Quotes should be submitted on the forms provided by the County. Quotes must be signed by an authorized employee, if submitting a hardcopy.
3. **AMENDMENTS TO THE REQUEST FOR QUOTE:** Any amendment to pricing is valid only if in writing and issued by the County.
4. **NO BID:** Persons desiring not to submit a quote should return the acknowledgement marking it "No-Bid", not later than the stated submittal deadline.
5. **NON-COLLUSION:** Bidder certifies that this bid is made without prior understanding, agreement or connection with any other corporation, firm or person submitting a bid for the same work, labor or service to be done or the supplies, materials or equipment to be furnished and is in all respects fair and without collusion or fraud. Bidder further understands collusive bidding is a violation of state and federal law and can result in fines, prison sentences and civil damage awards. Bidder agrees to abide by all conditions of this bid and certifies that person signing is authorized to sign this bid or proposal for the bidder.
6. **CONFLICT OF INTEREST:** Vendor states that no County officer or employee, nor any business entity in which they have an interest: a) Has an interest in the contract awarded; b) Has been employed or retained to solicit or aid in the procuring of the resulting contract; c) Will be employed in the performance of such contract without immediate disclosure of such fact to the County.

7. **BASIS OF AWARD:** The County shall award to the overall lowest responsible and responsive vendor complying with the provisions of the Request for Quote. The following criteria may be considered by the County in selecting the most advantageous quote: a) Ability to perform the service required within the specified time; b) Conformance to specification; c) The quality of performance in previous contracts; d) Financial ability to perform the contract; e) Item pricing; f) vendor references. The County reserves the right to cancel the solicitation and to reject any or all quotes in whole or in part and is not bound to accept any quote if rejection of that quote is determined to be contrary to the best interest of the County.
8. **SAMPLES:** Samples of items when required, must be furnished free of expense to the County and upon request, be returned to the Vendor at the Vendor's expense. Samples of selected items may be retained for comparison purposes.
9. **BRAND NAME SPECIFICATIONS AND APPROVED EQUIVALENTS:** Unless otherwise specified, manufacturer's names, trade names, brand names, information and/or catalog numbers listed in the specifications are intended only to identify the quality and characteristics desired. They are not intended to limit competition. The Vendor may offer any equivalent product which meets or exceeds the specifications. If quotations are based on equivalent products, the quote must: a) Indicate the alternate manufacturer's name and catalog number; b) Include complete descriptive literature and/or specifications; c) Include proof that the proposed equivalent will meet the specifications. The County reserves the right to be the sole judge of what is equal and acceptable to meet its needs in all respects. If Bidder fails to name a substitute, goods identical to the published standard must be furnished.
10. **INDEMNIFICATION:** Contractor/Vendor hereby agrees to release, indemnify, defend and hold harmless the County, it's Commissioners, officers, employees, subcontractors, successors, assigns and agents from and against any and all losses (including death), claims, damages, liabilities, costs and expenses (including but not limited to all actions, proceedings, or investigations in respect thereof and any outcome of any such action, proceeding, or investigation), caused by, relating to, based upon or arising out of any act or omission by contractor, it's directors, officers, employees, subcontractors, successors, assigns or agents, or otherwise in connection with it's acceptance, of the performance, or nonperformance, of it's obligations under this agreements.
11. **TAXES:** Fulton County is exempt from the State of Georgia sales tax and exemption certificate will be furnished upon request.
12. **DELIVERY:** All prices must be FOB Destination, unloaded inside and assembled unless otherwise indicated.

13. **RIGHTS AND REMEDIES OF COUNTY FOR DEFAULT:** If any item furnished by the Vendor fails to conform to specifications, or to the sample submitted by the Vendor, the County may reject it. Upon rejection, the Vendor must promptly reclaim and remove such item without expense to the County, and shall immediately replace all such rejected items with others conforming to such specification and samples. If the Vendor fails to do so, the County has the right to purchase in the open market a corresponding quantity of any such items and to deduct from any monies due the Vendor the difference between the prices named in the purchase order and the actual cost to the County. If the Vendor fails to make prompt delivery of any item, the County has the right to purchase such item in the open market and to deduct from any monies due the Vendor the difference between the prices named in the purchase order and the actual replacement cost to the County. The rights and remedies of the County identified above are in addition to any other rights and remedies provided by law or under the purchase order.
14. **INVOICES AND PAYMENT TERMS:** Invoices are to be mailed to the County department specified on the resulting purchase order or master agreement. All invoices must include the purchase order number or master agreement number. Failure to comply may result in delayed payments. The County payment terms are Net 30 days unless a cash discount is allowed for payment within not less than twenty (20) days. The payment term shall begin on the date the merchandise is inspected, delivered and accepted by the County and the correct invoice is received in the office specified on the purchase order.
15. **LEGAL REQUIREMENTS:** Federal, State, County and local ordinances, rules and regulations, and policies shall govern development, submittal and evaluation of quote and disputes about quotes. Lack of knowledge by any Vendor about applicable law is not a defense.
16. **ASSIGNMENT:** Any purchase order awarded shall not be assignable by the Vendor without the express written approval of the County, and shall not become an asset in any bankruptcy, receivership or guardianship proceedings.
17. **REJECTION OF BID:** Bids may be considered irregular and may be rejected if they show omissions, alternations of form, additions not called for, conditions, limitations, unauthorized alternate bids or other irregularities of any kind. The County reserves the right to waive minor technicalities or irregularities of bid.
18. **TERMINATION:** In the event any of the provisions of the purchase order are violated, the County may serve written notice of its intention to terminate the purchase order. Such notice will state the reason(s) for such intention, and unless within ten (10) days after serving notice upon the contractor, such violation has ceased and satisfactory arrangements for correction made, the purchase order shall, upon expiration of ten (10) days, be terminated. Further, the County reserves the right to terminate for its convenience any purchase order in whole or in part upon giving thirty (30) days prior written notice to the other party.

- 19. **DEBARMENT:** If a Bidder is presently debarred, suspended, proposed for debarment, declared ineligible, or otherwise excluded from doing business with any government agency which prohibits your firm from participating in any procurement, the Bidder must provide the County with that information as part of its response to this solicitation. Failure to fully and truthfully provide the information required, may result in the disqualification of your bid from consideration or termination of the purchase order, once awarded.

- 20. **RIGHT TO PROTEST:** Any actual or prospective Bidder who is aggrieved in connection with a solicitation or award of a contract/purchase order must submit its protest in writing to the Director of Purchasing, 130 Peachtree St. S.W., Suite 1168, Atlanta, GA 30303. A protest must be submitted to the Director of Purchasing in writing within 14 days after such aggrieved entity knows or should have known of the solicitation, the award of contract/purchase order to another or other acts giving rise to a protest. An oral protest or a protest to an official, employee, user department, or other person apart from the Director of Purchasing does not comply with Fulton County Code Section 2-324 and does not toll the protest time period.

Signature below is that of a person authorized to sign contracts for the quoting company who has read, understands, and agrees to comply with the above general terms and conditions.

Company: _____ **Signature:** _____
Name: _____ **Title:** _____ **Date:** _____

This signed form must be submitted with your bid. Failure to do so may result in your bid being found non-responsive.

REQUEST FOR QUOTE SPECIFICATIONS

Quote Number: 0758941YB-MW

Opening Date: 11/19/07

Cytology Services for Women
Health & Wellness

1. DESCRIPTION

The **Fulton County Purchasing Department** is soliciting quotes from qualified vendors to provide “**Cytology Services**” for the **Fulton County of Health & Wellness Department**.

2. CONTACT PERSON

Please contact Mae Wesley, Procurement Officer at (404) 730-5814 or by e-mail mae.wesley@fultoncountyga.gov, with any procedural or technical questions. All questions should be submitted in writing to the Purchasing contact person. Any responses made by the County will be provided in writing to all Bidders by addendum. No verbal responses shall be authoritative.

You must be registered in the County’s AMS System in order for the Department of Purchasing & Contract Compliance to issue your company a Purchase Order or to receive payments. If you are not a registered vendor you may access and complete the vendor application via the County’s Vendor Registration website (www.fultonvendorselfservice.co.fulton.ga.us). You must provide a copy of your current Business License in order to complete the vendor registration process.

If your company is a registered vendor, you can respond to all quotes online and in real time on this website.

3. PRODUCT/SERVICE SPECIFICATIONS

Specifications for Cytology Laboratory

Purpose:

- To provide cytology services to Georgia women, without insurance, between the ages of 21 and 64 or within three years after becoming sexually active.
- To submit reports for the State Cervical Cancer Screening Program.

- The vendor shall make pick-ups from all locations listed below during normal business hours of operation Monday – Fridays between the hours of (9:00 A.M. – 4:00P.M.).

| Health Center/Location | |
|--|---|
| <p>Adamsville Health Center 3699 Bakers Ferry Road, SW Atlanta, Georgia, 30331 (404) 699-4215 Nursing Supervisor: Larry Bell or contact: Cheryl Stallworth</p> | <p>Aldredge Health Center 99 Jesse Hill Jr. Drive SW, 3rd Fl. Clinic Atlanta, Georgia 30303 (404) 730-1485 Nursing Supervisor: Kitty Brogdon or contact: Delvin Taylor (404) 730-4029</p> |
| <p>Center for Health & Rehabilitation 265 Boulevard NE Atlanta, Georgia 30312 (404) 730-5835 Nursing Supervisor: Cheryl Freeman or contact: Mary Wells (404) 730-1613</p> | <p>Center Hill Health Center 3201 Atlanta Industrial Pkwy, SW Atlanta, Georgia 30318 (404) 699-6370 Nursing Supervisor: Beverly Kelly or contact: Irene Thompson (404) 699-4215</p> |
| <p>Willie J. Freeman College Park Regional Health Center 1920 John E. Wesley Ave. Atlanta, Georgia 30337 (404) 765-4148 Nursing Supervisor: Catherine Hampton contact: Yasmin Collier (404) 765-4155</p> | <p>Dunbar Teen Center 477 Windsor Street Atlanta, Georgia 30312 (404) 893-0773 Nursing Supervisor: Kitty Brogdon</p> |
| <p>Lakewood Health Center 1853 Jonesboro Road, SE Atlanta, Georgia 30315 (404) 624-0626 Nursing Supervisor: Michelle Fields contact: Seara McGarity (404) 730-5406</p> | <p>Neighborhood Union Health Center 186 Sunset Avenue, NW Atlanta, Georgia 30314 (404) 730-4665 Nursing Supervisor: Beverly Kelly contact: Margaret Blackwell</p> |
| <p>Palmetto Community Medical Center 507 Park Street Palmetto, Georgia 30268 (770) 463-3307 Nursing Supervisor: Catherine Hampton contact: Yasmin Collier</p> | <p>North Fulton Regional Health Center 2260 Old Milton Parkway Atlanta, Georgia 30004 (404) 332-1876 Nursing Supervisor: Chyrise Howard-Luck contact: Mary Nadolski</p> |
| <p>Sandy Springs Health Center 330 Johnson Ferry Rd. NE Atlanta, Georgia 30328 (404) 303-6162 Nursing Supervisor: Chyrise Howard-Luck contact: Vickii Norris</p> | <p>South Fulton Health Center 1225 Capitol Avenue SW Atlanta, Georgia 30315 (404) 730-5406 Nursing Supervisor: Michelle Fields contact: Seara McGarity</p> |

4. PRICING SHEETS

Reimbursements:

Having met all of the requirements listed below, reimbursement to the Laboratory will be at a rate of \$15.00 per slide, which includes \$13.50 for reading the Pap smear and \$1.50 for transmitting the data.

5. SPECIAL CONDITIONS/INSTRUCTIONS

5.1 Deliverables of the participating cytology laboratory:

- Meets all state and federal regulations for cytology laboratories. (Congress passed the Clinical Laboratory Improvement Amendments (CLIA) in 1988 establishing quality standards for all laboratories testing to ensure the accuracy, reliability and timeliness of patient test results regardless of where the tests were performed. The final CLIA regulations were published in the Federal Register on February 28, 1992. On January 24, 2003, the Centers for Disease Control and Prevention (CDC) and the Centers for Medicare & Medicaid Services (CMS) published final CLIA Quality systems laboratory regulations that became effective April 24, 2003.)

Comply: Yes _____ No _____

- Abides by all state and federal laws, rules and regulations related to confidentiality of an individual's records.

Comply: Yes _____ No _____

- Complies with current federal requirements and is licensed under the laws of the state of Georgia and performs cytology reading in the state of Georgia.

Comply: Yes _____ No _____

- Assures the laboratory performs the following services:

- Prepares and reads all slides and sends results to the county health department within

Comply: Yes _____ No _____

10 – 15 working days.

- Pap smear finds of ASC-H, HSIL, Squamous Cell Cancer or abnormal glandular cells are to be reported to the county Health District of origin by telephone or FAX within **5 working days**.

Comply: Yes _____ No _____

- Any laboratory specifications concerning specimen collection and handling are to be discussed with the District Health Director or his/her designee.
Comply: Yes _____ No _____
- Report Pap smear results using most current Bethesda System of classification.
Comply: Yes _____ No _____
- Provide Pap smear collection supplies including slides, cervical cytobushes, mailing supplies, or pick up service.
Comply: Yes _____ No _____
- Utilize the State Cervical Cancer Screening forms (3150) for all pap smears regardless of payer source.
Comply: Yes _____ No _____
- Submit client data electronically, monthly or more frequently.
Comply: Yes _____ No _____
- Submit data on all Pap smear results, regardless of payment source, i.e. those patients with Medicaid, Medicare and/or insurance.
Comply: Yes _____ No _____
- The Contractor will address data discrepancies with the laboratories.
 - Report discrepancies and resolution to the State Cervical Cancer Screening Program.
Comply: Yes _____ No _____

5.2 Reporting Requirements:

- The contracted cytology laboratory meets the following reporting requirements:
 - All clients' data for Pap smear results regardless of payment source, i.e. results on patients with Medicaid, Medicare and/or insurance will be transmitted to the State Cancer Screening Program **within 30 days**.
Comply: Yes _____ No _____

5.3 General Requirements

The bidder shall list on a separate sheet of paper any variations from, or exceptions to, the conditions and specifications of this bid. This sheet shall be labeled "**exceptions to bid conditions**" and shall be attached to quote.

Respondent must provide the following information:

Company Name: _____
 Contact Person: _____
 Street Address: _____

 A/C and Telephone No.: _____

Any award made as a result of this quote shall be for the remainder of the calendar year 2007.

5.4 Point of Contact

Please contact: Mae Wesley @ (404) 730- 5814 with any procedural or technical questions. All such contacts shall be in writing and submitted through the Department of Purchasing.

5.5 Vendor Contacting the Department before Award

No person, firm or business entity, however situated or composed, obtaining a copy of or responding to this solicitation, shall initiate or continue any verbal or written communications regarding this solicitation with any county officer, elected official, employee, or designated county representative, between the date of the issuance of this solicitation and the date of the final contract award by the authorized and permitted by the terms and conditions of this solicitation.

All verbal and written communications initiated by such person, firm or entity regarding this solicitation, if same are authorized and permitted by the terms and conditions of this solicitation, shall be directed to the purchasing agent.

Any violation of this prohibition of the initiation or continuation of verbal or written communication with county officers, elected officials, employees or designated county representatives; shall result in a written finding by the purchasing agent that the submitted bid or proposal of the person, firm or entity in violation is not responsive and same shall not thereafter be considered for award.

6. INSURANCE & RISK MANAGEMENT PROVISIONS

Insurance and Risk Management Provisions

It is Fulton County Government’s practice to obtain Certificates of Insurance from our Contractors and Vendors. Insurance must be written by a licensed agent in a company licensed to write insurance in the State of Georgia. Respondents shall submit with the bid/proposal evidence of insurability satisfactory to Fulton County Government as to form and content. Either of the following forms of evidence is acceptable:

- A letter from an insurance carrier stating that upon your firm/company being the successful Bidder/Respondent that a Certificate of Insurance shall be issued in compliance with the Insurance and Risk Management Provisions outlined below.
- A Certificate of Insurance complying with the Insurance and Risk Management Provisions outlined below (Request for Bid/Proposal number and Project Description must appear on the Certificate of Insurance).

Upon award, the Contractor/Vendor must maintain at their expense, insurance with policy limits equal to or greater than the limits described below. Any and all Insurance Coverage(s) and Bonds required under the terms and conditions of the contract shall be maintained during the entire length of the contract, including any extensions or renewals thereto, and until all work has been completed to the satisfaction of Fulton County Government.

Accordingly the Respondent shall provide a certificate evidencing the following:

**1. Workers Compensation/Employer’s Liability Insurance – Statutory
(In compliance with the Georgia Workers Compensation Acts and any other State or Federal Acts or Provisions in which jurisdiction may be granted)**

| | |
|--|-----------|
| Employer’s Liability Insurance by Accident - Each Accident | \$500,000 |
| Employer’s Liability Insurance by Disease - Policy Limit | \$500,000 |
| (Aggregate) By Disease - Each Employee | \$500,000 |

**2. Commercial General Liability Insurance
(Including contractual Liability Insurance)**

| | |
|---|-------------|
| Bodily Injury and Property Damage Liability | |
| Each Occurrence - | \$1,000,000 |
| (Other than Products/Completed Operations) | |
| General Aggregate - | \$2,000,000 |
| Products\Completed Operation | |
| Aggregate Limit - | \$1,000,000 |
| Personal and Advertising Injury | |
| Limits - | \$1,000,000 |
| Fire Damage | |
| Limits - | \$ 100,000 |

3. **Business Automobile Liability Insurance**
Combined Single Limits Each Occurrence - \$1,000,000
(Including operation of non-owned, owned, and hired automobiles)
4. **Electronic Data Processing Liability**
(Required if computer contractor) Limits - \$1,000,000
5. **Umbrella LIABILITY**
(In excess of above noted coverage's) Each Occurrence -
\$2,000,000
6. **PROFESSIONAL LIABILITY**
Each Occurrence - \$1,000,000
(Required if respondent providing bid/quotation for professional services)
7. **FIDELITY BOND**
(Employee Dishonesty) Each Occurrence - \$ 100,000
8. **BUILDERS RISK: *If the bid/quotation involves construction-related services the respondent will provide*** "All-risk" form of builder's risk insurance providing coverage against loss or damage by fire or other peril on an "all-risk" form, including demolition and increased cost of construction, debris removal and the full replacement cost of the Project foundations and containing an agreed amount endorsement, and, until Final Completion and Acceptance of the Project. Such policy of insurance shall contain at least the following sub-limits of insurance and deductibles:

Sub-limits:

| | |
|---------------------------------|---------------------------------|
| Property in Transit | \$1,000,000 |
| Property in Offsite Storage | \$1,000,000 |
| Plans & Blueprints | \$25,000 |
| Debris Removal | 25% of Insured Physical Loss |
| Delay in Completion / Soft Cost | TBD |

Deductibles:

| | |
|----------------------------------|-----------|
| Flood and Earthquake | \$25,000 |
| Water Damage other than Flood | \$100,000 |
| All other Perils | \$10,000 |

Owner and Contractor waive all rights against each other and any of their subcontractors, sub-subcontractors, agents and employees, each of the other, for damages caused by fire or other causes of loss to the extent covered by property insurance obtained pursuant to this Section, or other property insurance applicable to the Work, accept such rights as they have to the proceeds of such insurance.

Certificates shall state that the policy or policies shall not expire, be cancelled or altered without at least thirty (30) days prior written notice to Fulton County Government. Policies and Certificates of Insurance are to list Fulton County Government as an Additional Insured (except for Workers' Compensation) and shall conform to all terms and conditions (including coverage of the indemnification and hold harmless agreement) contained in the Insurance and Risk Management Provisions.

If Fulton County Government shall so request, the Respondent, Contractor or Vendor will furnish the County for its inspection and approval such policies of insurance with all endorsements, or confirmed specimens thereof certified by the insurance company to be true and correct copies.

Such certificates and notices shall be sent to:

Fulton County Government – Purchasing Department
130 Peachtree Street, S.W.
Suite 1168
Atlanta, Georgia 30303-3459

It is understood that **Insurance in no way limits the Liability of the Contractor/Vendor.**

USE OF PREMISES

Contractor shall confine its apparatus; the storage of materials and the operations of its workers to limits/requirements indicated by law, ordinance, permits and any restrictions of Fulton County Government and shall not unreasonably encumber the premises with its materials.

PROTECTION OF PROPERTY

Contractor will adequately protect its own work from damage, will protect Fulton County Government's property from damage or loss and will take all necessary precautions during the progress of the work to protect all persons and the property of others from damage or loss.

Contractor shall take all necessary precautions for the safety of employees of the work and shall comply with all applicable provisions of the Federal, State and local safety laws and building codes to prevent accidents or injury to persons on, about, or adjacent to the premises where work is being performed.

Contractor shall erect and properly maintain at all times as required by the conditions and progress of the work, all necessary safeguards for the protection of its employees, Fulton County Government employees and the public and shall post all applicable signage and other warning devices to protect against potential hazards for the work being performed.

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

Contractor/Vendor hereby agrees to release, indemnify, defend and hold harmless Fulton County, its Commissioners, officers, employees, subcontractors, successors, assigns and agents, from and against any and all losses (including death), claims, damages, liabilities, costs and expenses (including but not limited to all actions, proceedings, or investigations in respect thereof and any costs of judgments, settlements, court costs, attorney’s fees or expenses, regardless of the outcome of any such action, proceeding, or investigation), caused by, relating to, based upon or arising out of any act or omission by Contractor/Vendor, its directors, officers, employees, subcontractors, successors, assigns or agents, or otherwise in connection (directly or indirectly) with its acceptance, or the performance, or nonperformance, of its obligations under these agreements. Such obligations shall not be construed to negate, abridge or otherwise reduce any other rights or obligations of indemnity which would otherwise exist as to any party or person as set forth in this paragraph.

Contractor/Vendor’s obligation to protect, defend, indemnify and hold harmless, as set forth hereinabove, shall also include, but is not limited to, any matter arising out of any actual or alleged infringement of any patent, trademark, copyright, or service mark, or other actual or alleged unfair competition disparagement of product or service, or other tort or any type whatsoever, or any actual or alleged violation of trade regulations.

Contractor/Vendor further agrees to protect, defend, indemnify and hold harmless Fulton County, its Commissioners, officers, employees, subcontractors, successors, assigns and agents from and against any and all claims or liability for compensation under the Worker’s Compensation Act, Disability Benefits Act, or any other employee benefits act arising out of injuries sustained by any employees of Contractor/Vendor. These indemnities shall not be limited by reason of the listing of any insurance coverage.

If the bid/quotation involves construction services Contractor/Vendor will be responsible fully for any and all damage to the work during the course of construction, until the point of Final acceptance by Fulton County.

Fulton County acknowledges that all provisions of this indemnity agreement may not be applicable to the contractor/vendor’s business. To the extent that contractor/vendor may demonstrate such no applicability, Fulton County may negotiate amendments to this agreement as the circumstances dictate.

Contractor/vendor acknowledges having read, understanding, and agreeing to comply with this indemnification and hold harmless agreement, and the representative of the contractor/vendor identified below is authorized to sign contracts on behalf of the responding contractor/vendor.

Company: _____ Signature: _____
Name: _____ Title: _____ Date: _____