CONTRACT, LEASE, AGREEMENT CONTROL FORM

Date:	10/11/2024
Contract/Lease Control #:	L15-0419-PW
Procurement#:	NA
Contract/Lease Type:	LEASE
Award To/Lessee:	DESTIN WATER USERS
Owner/Lessor:	OKALOOSA COUNTY
Effective Date:	10/01/2024
Expiration Date:	09/30/2025 W/YEARLY RENEWAL
Description of:	STORAGE OF BEACH CLEANING EQUIPMENT
Department:	PW
Department Monitor:	COFFEY
Monitor's Telephone #:	850-689-5790
Monitor's FAX # or E-mail:	CCOFFEY@MYOKALOOSA.COM
Closed:	
Monitor's FAX # or E-mail:	CCOFFEY@MYOKALOOSA.COM

CC: BCC RECORDS



CONTRACT/LEASE RENEWAL FORM

CONTRACT:L15-0419-PW Date: 10/07/2024 **DESTIN WATER USERS, INC.** STORAGE OF BEACH CLEANING EQUIPMENT Company: Destin Water Users EXPIRES:09/30/2025 W/ ANNUAL RENEWALS Attn: Operations Manager Address: P.O Box 308 City, St, Zip: Destin, FL 32541 RE: Lease Renewal for 10/01/24-09/30/25 Dear Destin Water Users. The Okaloosa County Board of County Commissioners agrees to renew the subject for an additional term. The contract renewal contract/lease, # L15-0419-PW amount for this contract is \$17,677.19 ... All other terms and conditions of the original agreement shall remain in full force and effect through the duration of this renewal. If you are in agreement, please sign below and return this form along with a current Certificate of Insurance listing Okaloosa County as co-insured (if applicable). AUTHORIZED COMPANY REPRESENTATIVE COUNTY REPRESENTATIVES Contractor: Destin Water Users Inc. Dept. Director Amanda Signature: __ Maxwell Date: Digitally signed by DeRita Mason DeRita Approved By: Thomas Weidenhamer Date: 2024.10.11 14:11:53 -05'00' Approved By: Mason (as prescribed below on item 1) Date: Approved By: ___ (as prescribed below on item 1)

County Department Instructions:

Date: ____

1) Obtain signatures from Department Director, authorized Company Representative and then Purchasing Manager <\$25K and less, OMB Director \$25K to \$50K, County Administrator <\$100K and less or Board >\$100K, as necessary. If Board approval is required, the Chairman and County Administrator's signatures are required. Make sure the company provides a current Certificate of Insurance. (If applicable).

Date: 10/11/2024

- 2) Keep a copy of this form for your records.
- 3) Send original to Contracts and Lease Coordinator at Purchasing Department.

 If you have any questions please contact the Purchasing Manager at 850-689-5960, Fax: 850-689-5970