ARLINGTON COUNTY, VIRGINIA OFFICE OF THE PURCHASING AGENT 2100 CLARENDON BOULEVARD, SUITE 500 ARLINGTON, VIRGINIA 22201

CONTRACT RENEWAL

TO: EVERBRIDGE, INC. ORIGINIAL DATE ISSUED: AUGUST 13, 2020

155 NORTH LAKE BLVD. CONTRACT NO: 21-0EM-R-272

SUITE 900 CONTRACT TITLE: EMERGENCY ALERT SYSTEM

PASADENA, CA 91101

THIS IS A NOTICE OF RENEWAL AND NOT AN ORDER. NO WORK IS AUTHORIZED UNTIL THE VENDOR RECEIVES A VALID COUNTY PURCHASE ORDER ENCUMBERING CONTRACT FUNDS.

The contract documents consist of the terms and conditions of AGREEMENT No. 21-OEM-R-272 including any attachments or amendments thereto.

EFFECTIVE DATE: JANUARY 1, 2021 **EXPIRES:** DECEMBER 31, 2021

RENEWALS: THIS IS THE THIRD OF FIVE RENEWAL OPTIONS AVAILABLE.

COMMODITY CODE(S): 99039

EMPLOYEES NOT TO BENEFIT:

NO COUNTY EMPLOYEE SHALL RECEIVE ANY SHARE OR BENEFIT OF THIS CONTRACT NOT AVAILABLE TO THE GENERAL PUBLIC.

VENDOR CONTACT: COREY BAKER

EMAIL ADDRESS: COREY.BAKER@EVERBRIDGE.COM

COUNTY CONTACT: AARON MILLER (OEM AND PUBLIC SAFETY)

COUNTY TEL. NO.: (703) 228-7546

COUNTY CONTACT EMAIL: AMILLER@ARLINGTONVA.US

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THE COUNTY BOARD OF ARLINGTON EVERBRIDGE, INC.

COUNTY, VIRGINIA

PRINT: SY GEZACHEW PRINT: Phillip Huff
Docusigned by:

PRINT: Phillip Huff

SIGNATURE: Sy Gresachew SIGNATURE: Phillip Huff
TITLE: PROCRUBEMENTAGEFFICER TITLE: Chief Actionsportsophity. Officer

TITLE: PROCRUMENTAGEFFICER

DATE: 11/25/2020

TITLE: Chief-Accommissiong/Officer

DATE: 11/24/2020



155 North Lake Avenue, Suite 900 Pasadena, CA 91101 USA

tel: +1-818-230-9700 fax: +1-818-230-9505 www.everbridge.com

Quotation

Prepared for:

Aaron Miller Arlington County, VA 1425 N. Courthouse Rd., 7th Floor

Arlington VA 22201 **United States** Ph: (703) 228-7546

Fax: (703) 228-3989 Email: almiller@arlingtonva.us Quote #: Q-42152 Date: 6/29/2020 8/31/2020 **Expires On:** Confidential

Salesperson: Corey Baker Phone: (818) 230-9563

Email: corey.baker@everbridgemail.com

Contract Summary Information:

Contract Period: 6 Months

Contract End Date: 12/31/2020 Contract Option Years (in months) 36 Months

Contact Summary:

Household Count:	0
Employee Count:	8,000

Year 1

QTY	DESCRIPTION		PRICE	
8,000	Everbridge Mass Notification (MN) Additional Contacts		USD 7,642.85	
1	Everbridge Additional Organization		USD 252.74	
	Ye	ear 1 TOTAL:		USD 7,895.59

Setup

QTY	DESCRIPTION	PRICE
1	Calculated Set Up Fee	USD 0.00
	Setup TOTAL:	USD 0.00

Pricing Summary:

Year One Fees:	USD 7,895.59
One-time Implementation and Setup Fees:	USD 0.00
Professional Services:	USD 0.00

Total Year One Fees Due:	USD 7,895.59
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Option Years:

Contract Option Years (in months)	36 Months
Ongoing Annual Fees :	USD 15,620.00

- 1. Additional rates apply for all international calls.
- 2. This Quote and the Services provided hereunder are subject to the terms and conditions of the agreement entered into between Everbridge and Fairfax County, Virginia, having an effective date of February 14, 2014 (the "Agreement").
- 3. In the event that the Agreement expires prior to the end date set forth on this Quote (the "End Date"), the Parties agree that the Quote shall remain valid and the terms and conditions of the Agreement shall apply until the End Date.
- 4. Subject to sales taxes where applicable.
- 5. Except for currency designation, the supplemental notes below, if any, supplied in this Quote are for informational purposes and not intended to be legally binding or override negotiated language of the Agreement.

Supplemental Notes:

This quote is to allow an additional organization and up to 8,000 employees for the Arlington County Public Schools use of Everbridge Mass Notification.

Ongoing annual fees will be \$15,620.

Authorized by Everbridge:							
Signature:	Date:						
-							
Name (Print):	Title:						
To accept this quote, sign, date and return:							
Signature:	Date:						
	•						
Name (Print):	Title:						

155 North Lake Avenue, Suite 900 Pasadena, CA 91101 USA Tel: +1-818-230-9700 Fax: +1-818-230-9505

THANK YOU FOR YOUR BUSINESS!



155 N. Lake Ave., Suite 900 t 888.366.4911 www.everbridge.com Pasadena, CA 91101 USA **f** 818.484.2299

CLIENT REGISTRATION FORM

* Required information

* CONTRACTING PARTY	/ / COMPANY NAME:		
* REQUESTOR / APPRO	VER OF SERVICE PURCHASE		
Contact Name:		Phone Number:	
Email Address:		Alternate Phone:	
* INVOICE DELIVERY / F	REMITTANCE EMAIL(S):		
l .	R REQUIRED FOR PAYMENT? ed at time of purchase. Failure to do so may	Yes result in processing delays. Forward to Final.Docum	Noents@everbridge.com
		(U.S. Clients only)	
* IS YOUR ORGANIZATI	ON EXEMPT FROM PAYING SALES A		No
If YES, please submit <u>Tax I</u>	Exemption Certificate to Final.Documents@	Everbridge.com	
If your organization utili	zes Direct Pay, please submit Direct Pay	Permit to Final.Documents@Everbridge.com	
	ES NOT SUPPORT TAX EXEMPT STATUS		
* FAILURE TO PROVIDE PR	ROOF OF TAX EXEMPT STATUS OR PROOF C	OF DIRECT PAY PERMIT WILL BE SUBJECT TO SALES	TAX, WHERE APPLICABLE
* VAT Registration No.	(if applicable)		
* BILL-TO ADDRESS:			
Contact Name:			
Address:			
City:		State/Province/Region:	
Postal/Zip Code:		Country:	
* ACCOUNTS PAYABLE	CONTACT:	PURCHASER CONTACT IN	FORMATION:
Contact Name:	Email Address:	Contact Name:	Email Address:
Phone Number:	Fax Number:	Phone Number:	Fax Number:
Department:		Department:	
NOTES / REMIT INSTRU	CTIONS:		
VENDOR REGISTRATIO	N FORMS / REQUIREMENTS (EX: W9	ACH/WIRE INSTRUCTIONS).	
	must be emailed to VendorRequests@Everb		