ARLINGTON COUNTY, VIRGINIA

AGREEMENT NO. 22-DHS-EP-8 AMENDMENT NUMBER 2

This Amendment Number 2 ("Amendment") is made on the date of execution by the County and amends Agreement Number 22-DHS-EP-8 ("Main Agreement") dated July 1, 2021 between Arlington Thrive ("Contractor") and the County Board of Arlington County, Virginia ("County").

The County and the Contractor agree to amend the Main Agreement as follows:

1. ADD THE FOLLOWING LANGUAGE TO PARAGRAPH 6, PAYMENT:

If the balance of the Carter-Jenkinson Housing Assistance Fund falls below \$50,000 and/or the balance of the Daily Fund falls below \$25,000 at any time during the Contract Term, the Contractor may request the next Quarter's payment by submitting an invoice and the General Ledger report showing the current fund balance.

2. <u>ADD THE FOLLOWING LANGUAGE AS PARAGRAPH 54. COVID-19 VACCINATION POLICY FOR</u> <u>CONTRACTORS</u>

Due to the COVID-19 pandemic, the County has taken various steps to protect the welfare, health, safety and comfort of the workforce and public at large. As part of these steps, the County has implemented various requirements with respect to health and safety including policies with respect to social distancing, the use of face-coverings and vaccine mandates. All County Contractors, entering County owned, controlled, or leased facilities or facilities operated by a contractor if the services provided at that location are exclusive to Arlington County Government or contractors with public facing responsibilities must adopt these policies for implementation with their employees and subcontractors working on County contracts.

Contractors are required to obtain and maintain the COVID-19 vaccine status of employees or subcontractors, require any unvaccinated or not fully vaccinated employees to follow a weekly testing protocol established by the Contractor to submit to weekly testing, and provide any accommodations as required by law. Contractor should submit the certification of compliance to the Purchasing Agent at the time of contract execution and within five working days of the end of each quarter (see Exhibits J & K). In addition, all Contractor and subcontractor employees subject to the requirements of this section must also comply with the County COVID-19 masking and social distancing protocols, as signed at each County location.

It is recognized that the COVID-19 pandemic is an ongoing health crisis. As such, requirements with respect to health and safety, including vaccines and face-coverings may change over time. Contractors are expected to adhere to the County requirements as they evolve in response to the crisis.

For questions, Contractors may email contractorvaccineinfo@arlingtonva.us.

3. SEE ATTACHED EXHIBIT J – CONTRACTOR COVID-19 VACCINATION CERTIFICATION

4. <u>SEE ATTACHED EXHIBIT K – CONTRACTOR COVID-19 VACCINATION QUARTERLY COMPLIANCE</u> <u>CERTIFICATION</u>

All other terms and conditions of the Main Agreement, as amended shall remain in full force and effect.

WITNESS THESE SIGNATURES:

THE COUNTY BOARD OF ARLINGTON COUNTY, VIRGINIA

ARLINGTON THRIVE

-DocuSigned by: SIGNEDUCAS Alexander PRINT NAME: Lucas Alexander

SIGNED: Indrew Schneider -7541FA9F1BC4494...

PRINT NAME: _____ Schneider

Procurement Officer

DATE: _____

TITLE: ______ Executive Director xecutive Director

DATE: _____

EXHIBIT J

CONTRACTOR COVID-19 VACCINATION CERTIFICATION

I hereby certify that all Arlington Thrive employees and subcontractors who will be working on Contract No. 22-DHS-EP-8 are fully vaccinated against COVID-19, being tested on a weekly basis, or are exempt pursuant to a valid reasonable accommodation under state or federal law.

Please do not include any of your employees' medical documentation, including vaccination records or test results.

Date: DocuSigned by: Signature 7541FA9F1BC4494... Printed Name: Andrew Schneider

Title: _______ Executive Director xecutive Director

<u>EXHIBIT K</u>

CONTRACTOR COVID-19 VACCINATION QUARTERLY COMPLIANCE CERTIFICATION

By Email: Please complete the report below and return it to: <u>contractorvaccineinfo@arlingtonva.us</u>.

□ I hereby certify that all Arlington Thrive employees and subcontractors working on Contract No. 22-DHS-EP-8 are fully vaccinated against COVID-19, being tested on a weekly basis, or are exempt pursuant to a valid reasonable accommodation under state or federal law.

Please do not include any of your employees' medical documentation, including vaccination records or test results.

Date: _____

Signature: _____

Printed Name and Title: ______

Company Name: _____