



**Contract Number**

\_\_\_\_\_

**SAP Number**

\_\_\_\_\_

## Department of Public Health

**Department Contract Representative** Stephanie Ramos  
**Telephone Number** (840) 587-6596

**Contractor** \_\_\_\_\_  
**Contractor Representative** \_\_\_\_\_  
**Telephone Number** \_\_\_\_\_  
**Contract Term** Upon execution through  
December 31, 2030

**Original Contract Amount** \_\_\_\_\_  
**Amendment Amount** \_\_\_\_\_  
**Total Contract Amount** \_\_\_\_\_  
**Cost Center** \_\_\_\_\_  
**Grant Number (if applicable)** \_\_\_\_\_

### IT IS HEREBY AGREED AS FOLLOWS:

Department of Public Health Environmental Health Services Memorandum of Understanding (MOU) template, effective upon execution by both parties, to remain in effect through December 31, 2030, but can be terminated by either party without cause upon 30 days prior written notice to the other party. The MOU may be terminated for just cause immediately by the County. The Director of Public Health shall be authorized to execute the individual MOU template on behalf of the County.

#### FOR COUNTY USE ONLY

Approved as to Legal Form

► \_\_\_\_\_  
Adam Ebright, Deputy County Counsel

Date \_\_\_\_\_

Reviewed for Contract Compliance

► \_\_\_\_\_

Date \_\_\_\_\_

Reviewed/Approved by Department

► \_\_\_\_\_  
Joshua Dugas, Director

Date \_\_\_\_\_