



Contract Number

15-517 A4

SAP Number

4400001473

Department of Risk Management

Department Contract Representative	LeAnna Williams
Telephone Number	909-386-8621
Contractor	Insurity Claims Software, LLC
Contractor Representative	Mark Adessky
Telephone Number	1-514-289-9090 Ext. 10111
Contract Term	July 28, 2015 through July 27, 2021
Original Contract Amount	\$1,757,351
Amendment Amount	\$378,176
Total Contract Amount	\$2,135,527
Cost Center	Various

IT IS HEREBY AGREED AS FOLLOWS:

(Use space below and additional bond sheets. Set forth service to be rendered, amount to be paid, manner of payment, time for performance or completion, determination of satisfactory performance and cause for termination, other terms and conditions, and attach plans, specifications, and addenda, if any.)

Amendment No. 4 to Contract No. 15-517

WHEREAS, The County of San Bernardino and Contractor desire to amend and modify the Agreement as follows:

IV. CONTRACT TERM, is replaced with the following:

- A.** The term of the Contract(s) awarded will be for a three (3) year period from the date of approval by the County of San Bernardino Board of Supervisors, beginning on July 28, 2015 and ending on July 27, 2018, **with the option of two (2) one-year contract extensions**, unless terminated earlier as provided within the awarded Contract. If Contract negotiations for renewals are delayed for reasons beyond control of the Contractor, the Contract shall automatically be extended under the same terms and conditions until terminated by written notice by either party or by execution of a new Contract.

Amendment No. 2 and No. 3, executed the two one-year contract extensions, from July 28, 2018 through July 27, 2020.

Amendment No. 4 will extend the contract period for one additional year, from July 28, 2020 through July 27, 2021.

- B.** Notice of Cancellation: The Contract may be terminated by any party for any reason upon thirty (30) days' written notice.

WHEREAS, The County of San Bernardino and Contractor desire to amend and increase the total contract amount by \$378,176. Addendum No. 4 hereby attached to the agreement, specifies in detail the services and fees included in the total amendment amount.

WHEREAS, The County of San Bernardino and Contractor are currently complying with shelter at home orders due to Covid-19, this agreement may be executed in any number of counterparts, each of which so executed shall be deemed an original, and such counterparts shall together constitute one and the same Agreement. The parties shall be entitled to sign and transmit an electronic signature of this Agreement (whether by facsimile, PDF or other email transmission), which signature shall be binding on the party whose name is contained therein. Each party providing an electronic signature agrees to promptly execute and deliver to the other party an original signed Agreement upon request.

COUNTY OF SAN BERNARDINO

►

Curt Hagman, Chairman, Board of Supervisors

Dated: _____
SIGNED AND CERTIFIED THAT A COPY OF THIS
DOCUMENT HAS BEEN DELIVERED TO THE
CHAIRMAN OF THE BOARD

Lynna Monell
Clerk of the Board of Supervisors
of the County of San Bernardino

By _____
Deputy

Insurity Claims Software, LLC

(Print or type name of corporation, company, contractor, etc.)

By ► _____
(Authorized signature - sign in blue ink)

Name Mark Adessky
(Print or type name of person signing contract)

Title General Counsel
(Print or Type)

Dated: _____

Address 170 Huyshope Ave.
Hartford, CT 06106

FOR COUNTY USE ONLY

Approved as to Legal Form

►
Teresa McGowan, County Counsel

Date _____

Reviewed for Contract Compliance

► _____

Date _____

Reviewed/Approved by Department

►
LeAnna Williams, Director of Risk Management

Date _____