PAGE NO. 1

Laura.Shimmons@iparametrics.com 104312 IPARAMETRICS LLC 6515 SHILOH RD STE 200 ALPHARETTA GA 30005-835

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18900 CORTEZ BLVD BROOKSVILLE FL 34601

REQ. NO.: 0 ORDER DATE: 10/18/24 BUYER: LBROWN REQ. DATE: F.O.B.: DESTINATION DESC.: EPO FOR RELIEF EFFORTS TERMS: NET 30 DAYS ITEM# QUANTITY DESCRIPTION UNIT PRICE This Emergency Purchase is in accordance with Hernando County Purchasing Policy 060F. The estimated dollar amount reflected is only a County estimate. The Contractor/Vendor shall provide final invoice to the County Project Manager detailing the actual costs involve for final invoicing amount. The Department will process a Change Order to the Purchase Order revising the amount of the emergency for processing and payment by Accounts Payable. Contract Terms and Conditions apply; Hernando County Contract # 25-P0193; Contract expires July 26, 2025. County Contact: Erin Thomas, Phone Number: (352) 587-3030 Contractor Contact: Falon Alo, Phone Number: (732) 996-4818 Email: falon.alo@iparametrics.com 01 95585.40 JOB EPO SUPPORT COORDINATION OF ONGOING 1.0000 95,585.40 RESPONSE EFFORTS

ITEM#	ACCOUNT	AMOUNT	PROJECT CODE	PAGE TOTAL	•
01	40011 5303401	95,585.40	MILTON24	TOTAL	\$ 95,585.40
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# HERNANDO COUNTY PURCHASE ORDER TERMS AND CONDITIONS

### **GENERAL**

The condition of this order <u>may not</u> be changed by Vendor/Contractor. If order is not acceptable, return to Hernando County Purchasing and Contracts Department. Failure of a Vendor/Contractor to deliver according to this purchase order awarded to him or to comply with any of the terms and conditions therein may disqualify him from receiving future orders.

#### QUALITY

All material or services furnished on this order must be as specified and subject to County inspection and approval within a reasonable time after delivery at destination. Variations in materials or services from those specified in this order must not be made without written authority from the Chief Procurement Officer. Materials rejected will be returned at the Vendor/Contractor's risk and expense.

#### **QUANTITY/PRICE**

The quantity of materials ordered or the prices specified must not be exceeded without written authority being first obtained from the Chief Procurement Officer.

### **INDEMNITY AND INSURANCE**

The Vendor/Contractor agrees to indemnify and hold harmless Hernando County, including its officers, agents and employees, from all claims, damages, losses and expenses, including reasonable attorneys' fees, and costs brought or incurred on account of injuries or damages sustained by any party due to the operations of the Vendor/Contractor under this contract. The Vendor/Contractor further agrees to provide workers' compensation for all employees, and to maintain such general and auto liability insurance as is deemed necessary by the County for the particular circumstances and operations of the Vendor/Contractor. The Vendor/Contractor further agrees to provide the County with Certificates of Insurance, indicating the amount of coverage in force, upon request.

### **PACKING**

Packages must be plainly marked with shipper's name and purchase order number; charges are not allowed for boxing or crating unless previously agreed upon in writing.

### **DELIVERY**

All materials must be shipped F. O. B. destination. The County will pay no freight or express charges, except by previous agreement. If specific purchase is negotiated on the basis of F.O.B. shipping point, VENDOR/CONTRACTOR ARE TO PREPAY SHIPPING CHARGES AND ADD TO INVOICE. Delivery must actually be affected within the time stated on purchase made between 8:00 AM and 5:00 PM Monday to Friday inclusive unless otherwise stated. In case of default by the Vendor/Contractor, Hernando County may procure the articles or services covered by this order from other sources and hold the Vendor/Contractor responsible for any excess occasioned thereby.

#### **PAYMENT**

Partial billing will be accepted only for items received within the specified delivery period. Payments for items delivered after this specified delivery period will be made after the entire order is completed and accepted by Hernando County. Payment shall be made in accordance with Florida Statute 218, Florida Prompt Payment Act. Payment for accepted equipment/supplies/services will be accomplished by submission of an invoice, in duplicate; to the Ship To Address on the front of the purchase order unless otherwise indicated.

#### **MATERIAL SAFETY DATA SHEET**

The Vendor/Contractor agrees to furnish Hernando County with a current Material Safety Data Sheet (MSDS) on or before delivery of each and every hazardous chemical or substance purchased which is classified as toxic under Florida Statute 442. Appropriate labels and MSDSs shall be provided for all shipments. Send MSDSs and other pertinent data to: Hernando County Purchasing and Contracts Department, 20 North Main Street, Room 365, Brooksville, FL 34601-2828.

# **OSHA REQUIREMENT**

The Vendor/Contractor or contractor hereby guarantees Hernando County that all materials, supplies and equipment as listed on the purchase order meet the requirements, specifications and standards as provided for under the Federal Occupations Safety and Health Administration Act of 1970, as from time to time amended and in force at the date thereof.

# **LEGALLY AUTHORIZED WORKFORCE**

VENDOR/CONTRACTOR represents and warrants that VENDOR/CONTRACTOR is in compliance with all applicable federal, state and local laws, including, but not limited to, the laws related to the requirement of an employer to verify an employee's eligibility to work in the United States.

VENDOR/CONTRACTOR is encouraged (but not required) to incorporate the IMAGE best practices into its business and, when practicable, incorporate verification requirements into its agreements with subcontractors. The IMAGE Best Practices can be found on the COUNTY'S website at <a href="https://www.hernandocounty.us/pur/">www.hernandocounty.us/pur/</a>.

## **INSURANCE**

The Contractor shall maintain in effect at all times during the performance of the services insurance coverage according to the Contract between Contractor and COUNTY. All waiver of subrogation provisions of the Contract apply. In the absence of a current Contract, the Contractor shall, at its sole expense, maintain in effect at all times during the performance of the services insurance coverage with limits not less than those set forth below (unless the County agrees in writing to lower limits) and with insurers and under forms of policies satisfactory to COUNTY; Contractor shall endorse Hernando County as an additional insured on the commercial general liability (additional insured shall read "Hernando County Board of County Commissioners); Contractor waives subrogation as to the General Liability policy unless a policy condition prohibits pre-loss waiver of subrogation, in which case Contractor shall request of the insurer that the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others unless such policy prohibits such an endorsement or voids coverage should VENDOR/CONTRACTOR enter into such an agreement on a pre-loss basis.

## Coverage Minimum Amounts and Limits

(a) Worker's Compensation Statutory requirements at location of work Employer's Liability \$ 100,000 each accident

\$ 100,000 each accident

\$ 100,000 by employee

\$ 500,000 policy limit

\$ 2,000,000 General Aggregate \$ 2,000,000 Products-Comp. Ops Agg.

\$1,000,000 Each Occurrence

5.000 Medical Expense

\$ 1,000,000 Combined Single Limit (owned, hired and non-owned)

(c) Automobile Liability
Option of Split Limits:
(1.) Bodily Injury

Of Subrogation)

(b) Commercial General Liability

(Additional Insured & Wavier

\$ 1,000,000 Per Person or \$1,000,000 Per Accident

Emergency Form 4 Created: 9/1/2023

# HERNANDO COUNTY NOTICE OF EMERGENCY PURCHASE ORDER

Instructions: Departments may make emergency purchases, but are required to complete this form. If the emergency occurs after normal duty hours, the emergency form and requisition **shall** be submitted to the Chief Procurement Officer the next business day.

# **Definitions:**

Vendor Name: iParametrics

*Emergency:* Any occurrence, or threat thereof, whether accidental, natural, or caused by man, in war or peace, which results or may result in substantial injury or harm to the population or substantial damage to or loss of property (section 252.34(3), Florida Statutes).

# County Ordinance and Purchasing Policy and Procedures 060D:

Address: 6515 Shiloh Road, STe 200 Alpharetta GA 30005

*Emergency*. Any occurrence or set of circumstances involving actual or imminent physical trauma or property damage which demands immediate action.

*Emergency work.* Any work performed for the purpose of preventing or alleviating the physical trauma or property damage threatened or caused by an emergency.

Vendor Number: 104312

*Emergency purchase* means a procurement of goods and/or services made in response to a requirement when the delay incident to complying with all governing rules, regulations, and/or procedures would be detrimental to the health, safety and welfare of the county and/or its citizens.

Vendor	<sub>Contact:</sub> Falon Alo	Phone #: 732-996-4818	Email: falon.alo@ipar	ametrics.com
Depart		Phone #		
Depart	ment #: 40011	Account #: 5303401	Project Code: Mi	lton24
		To Number/Code: 02431-2	Contract #: <u>25-P0193</u>	Expires: 7/26/2025
DATE (	OF DECLARED EMERGEN	<b>cy</b> : 10/6/24	ESTIMATED COST: \$_95	5,585.40
BRIEF	DESCRIPTION OF THE EN	IERGENCY:		
	See email attched - this	s is for the decalred STat	te of Emergency Milton:	24
EMER	GENCY PURCHASE JUST	IFICATION : (Please check	below all that applies to	this purchase
		tation). Email form and su		
1.	An immediate danger to th	ne public (check all that applie	es:) <u>√</u> health, <u>√</u> safety, _	welfare, or other
	substantial loss to Hernan	do County, requires emerger	icy action.	
2.		es giving rise to the emergend	•	
	to this request if necessar	<sub>/):</sub> <u>Declared State of Em</u>	ergency for Hurricane I	Milton24
3.	Describe the efforts to obt	ain pricing information from a	t least three vendors, or des	scribe the increased
	immediate danger that wo	uld result from such efforts (a	additional documentation ma	ay be attached to this
	request if necessary):			
be pur		rocurement be waived and the modity. I certify that the info		
	yee Requesting: Erin Tho	mas	Date:10/18/2	4
Depart	tment Director/Manager: Se	ee attached email	10/18/2 Date:	24
	rement Approver:	· Rosst-x	Date: 10/18/20	24

Place this document in the emergency file and attach a copy to the Purchase Order/Credit Card along with any back up documentation.



October 17, 2024

David DeCarlo Hernando County Emergency Management 18900 Cortez Blvd. Brooksville, FL 34601

Re: Hurricanes Helene and Milton Support

Dear Mr. DeCarlo.

Thank you for considering allowing us to support your team through the response efforts following Hurricanes Helene and Milton. iParametrics is humbled to have the opportunity to provide this letter proposal for our initial engagement to support your team with the coordination of ongoing response and humanitarian efforts.

#### Our team will:

Sincerely.

- Coordinate with State and Federal staff to ensure the efficacy of relief efforts
- Coordinate Mass Care and Non-Congregate Sheltering to meet the ongoing mass care needs

The work performed under this contract would be done under GSA's Disaster Purchasing Program through iParametrics contract #GS-10F-112CA. The chart below details the estimated hours and rates to perform this work. Hernando County will only be billed for the hours worked during this engagement, which shall not exceed 90 days:

Name	Position	Rate	Hours	Total
Falon Alo – Mass Care	Emergency Manager III	\$182.34	240	\$43,761.60
Alexis Balde – Mass Care	Project Manager II	\$145.87	180	\$25,567.20
Case Work Specialist	Project Manager I	\$116.70	180	\$26,256.60
Total				\$95,585.40

Any expenses shall be billed at GSA rates and at a reasonable cost per any additional GSA Waivers. If you have any questions or concerns, please donot hesitate to contact Falon Alo at 732-996-4818.

	Authorized by:	Date:
Jeff Stevens, CEM, MEP Executive Vice President	Name	

# Fran Hallet

From: Carla Rossiter-Smith

**Sent:** Friday, October 18, 2024 7:55 AM

To: Fran Hallet Cc: Erin Thomas

**Subject:** FW: iParametrics Revised Proposal

Attachments: Hernando County Emergency Contract\_iParametrics LLC\_10.17.24.pdf; EPO 25000081

Thomas Howard Ferguson combined.pdf

# Hi Fran,

Will you please prepare an EPO for this quote and an associated internal file # for the contract we are piggybacking. For your reference, the procurement manual allows for piggyback of GSA contracts in emergency situations (sec 25.F). Please associate this with Milton24. Erin T. will be the POC for the County. Please use the same account code in the attached EPO, please. Erin please correct if there is anything that is not in keeping with the need.

Thanks,

Carla Rossiter-Smith, MSM PMP Chief Procurement Officer Crossiter-smith@co.hernando.fl.us

Office: (352) 540-6544 Cell: (352) 667-4272

From: Falon Alo <Falon.Alo@iparametrics.com> Sent: Thursday, October 17, 2024 9:55 AM

To: Carla Rossiter-Smith < CRossiter-Smith@co.hernando.fl.us>; David DeCarlo < DDeCarlo@co.hernando.fl.us>; Erin

Thomas <EThomas@co.hernando.fl.us>

Cc: Jeff Stevens < Jeff. Stevens@iparametrics.com>

**Subject:** iParametrics Revised Proposal

**CAUTION:** This email originated from outside the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

# Dear Carla,

Please find attached a revised version of our previous proposal. We have revised the proposal to reflect the current mission and support needed for the response activities. Please let me know if you have any questions or want to discuss this further.

Best regards,

Falon

Falon Alo, MSW

she/her/hers

Director, Humanitarian Services

Cell: 732.996.4818

falon.alo@iparametrics.com

# Book time with me.

