

DeKalb County
Department of Purchasing and Contracting
Contract Renewal Request Form

User Departments: Watershed Management (DWM)

From:

ITB No.:

Title:

Effective Date:

Expiration Date:

Contract APPROVED Amount:

Number of Renewals to Date:

Amount Released:

Contractor(s)	Contract No.	Agrees to Extend
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User Department Recommendation:

Renew

Bid

Funding for Renewal Term: _____

(Unused funds do not roll over to the next term. Provide the amount of funding necessary for the renewal term.)

Funding: General Enterprise 3 Digit Fund Code _____

CIP Line Item No. (if applicable): _____ Award Amount(s): _____

Vendor 1: _____ Vendor 2: _____
Name/Amount Name/Amount

Vendor 3: _____ Vendor 4: _____
Name/Amount Name/Amount

Justification:

Department Director Signature

Date

For Use by Purchasing and Contracting:

Approve

Deny

Additional Comments:

Purchasing and Contracting Signature

Date