AGENDA NOTES

of expiring/expired contract (If no previous contract, please indicate.)including Removal, Relocation & Installation ITB#20-101227 CPA#1221710Previous Contract Number, Contractor Name and Award Amount (Include Increases and Total Award Amount)TOTAL: \$150,000.00Previous Amount Spent on Expiring/Expired Contract (If multiple award, List Amount Spent per contract and include Total Amount Spent)TOTAL: \$98,496.98Prime Contractor Information and LSBE - Subcontractor (Prime: Company Name, Owner Name and Title, Number years in business and Number of Years doing business with DeKalb County) (LSBE: LSBE Type (DeKalb or MSA, Participation Percentage, Company Name, Owner Name and Title, Address, Type of WorkPrime contract (If no Prime SP Performation and Prime SP Petroleum Prime SP Petroleum Primes SP Petroleum P	Solicitation Name and Number	Maintenance, Cleaning & Inspection of Fuel Tanks
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business)		
Attachments: Change Order Request Form	Attachments:	Change Order Request Form