



STANDARD CONTRACT AMENDMENT

CITY OF BOSTON

Department: Mayor's Office of Emergency Management (OEM)

Department Head: Rene Fielding

Original Contract Details

Description/Scope of Services: Maintenance on and enhancements to the Metro Boston Homeland Security Region's Critical Infrastructure Monitoring Systems (CIMS) camera network.	
Contract ID: 40555	Procurement Type: MA State Contract FAC64
Vendor/Contractor Details	
Vendor Name: Lan-Tel Communications, Inc.	Vendor ID: 19146

Amendment Details

Amendment Number: 2	Amendment Version: 2
Reason for Amendment: Due to the availability of an extended grant performance period, an amendment is need to allow for additional time to continue maintenance and enhancements to the network.	
Amendment Amount: \$0	
New Not To Exceed Amt: \$2,950,000	Previous Not To Exceed Amt: \$2,950,000
New End Date: 5/31/18	Previous End Date: 7/31/17
Begin Date: 3/5/15	
Scope of Services Changes (Describe scope changes in detail. Attach additional pages if necessary):	
Unit prices remain the same or less. All other terms & conditions of the contract shall remain in full force and effect.	

Contract Signatures

AUDITING	CONTRACTOR	AWARDING AUTHORITY/OFFICIAL
APPROVED AS TO AVAILABILITY OF APPROPRIATION OR PURSUANT TO ARTICLE 12.2 OF THE GENERAL CONDITIONS	AGREES TO PROVIDE THE GOODS OR SERVICES AS INDICATED IN ACCORDANCE WITH THESE CONTRACT DOCUMENTS.	THIS AMENDMENT IS NECESSARY TO FULFILL THE CITY'S NEEDS AND IS MORE ECONOMICAL AND PRACTICAL THAN AWARDED ANOTHER CONTRACT.
SIGNATURE	SIGNATURE	SIGNATURE
DATE	TITLE	DATE
	DATE	

APPROVED:

ASSENTED TO (IF APPLICABLE):

Mayor

Surety Company:
By: Attorney-in-Fact

(Affix Surety Company Corporate Seal)



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Contract ID: 40555	Procurement Type: MA State Contract FAC 64
Vendor/Contractor Details	
Vendor Name: Lan-Tel Communications, Inc.	Vendor ID: 19146

Amendment Details

Amendment Number: 1	Amendment Version: 1
Reason for Amendment: Allowing for additional time and funding to continue maintenance and enhancements to the system	
Amendment Amount: \$1,500,000	
New Not To Exceed Amt: \$2,950,000	Previous Not To Exceed Amt: \$1,450,000
New End Date: 7/31/17	Previous End Date: 7/31/16
Begin Date: 3/5/15	
Scope of Services Changes (Describe scope changes in detail. Attach additional pages if necessary):	
Unit prices remain the same or less. All other terms & conditions of the contract shall remain in full force and effect.	

Contract Signatures

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COMMONWEALTH OF MASSACHUSETTS ~ STANDARD CONTRACT FORM



This form is jointly issued and published by the Executive Office of Administration and Finance (ANF), the Office of the Comptroller (CTR) and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. Any changes to the official printed language of this form shall be void. Additional non-conflicting terms may be added by Attachment. Contractors may not require any additional agreements, engagement letters, contract forms or other additional terms as part of this Contract without prior Department approval. Click on hyperlinks for definitions, instructions and legal requirements that are incorporated by reference into this Contract. An electronic copy of this form is available at www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osd under OSD Forms.

CONTRACTOR LEGAL NAME: Lan-Tel Communications, Inc. (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Operational Services Division MMARS Department Code: OSD	
Legal Address: (W-9, W-4, T&C): 1400 Boston Providence Tpke. #2, Norwood, MA 02062-5044		Business Mailing Address: One Ashburton Place, Room 1017, Boston, MA 02108	
Contract Manager: Kate Waldron		Billing Address (if different):	
E-Mail: kwaldron@lan-tel.com		Contract Manager: Stephen Lyons	
Phone: 781-551-8599	Fax:	E-Mail: steve.lyons@state.ma.us	
Contractor Vendor Code: VC6000177274		Phone: 617-720-3373	Fax: 617-727-4527
Vendor Code Address ID (e.g. "AD001"): AD001 (Note: The Address ID must be set up for EFT payments.)		MMARS Doc ID(s): FAC64*	
NEW CONTRACT		X CONTRACT AMENDMENT	
PROCUREMENT OR EXCEPTION TYPE: (Check one option only) <input type="checkbox"/> <u>Statewide Contract</u> (OSD or an OSD-designated Department) <input type="checkbox"/> <u>Collective Purchase</u> (Attach OSD approval, scope, budget) <input type="checkbox"/> <u>Department Procurement</u> (Includes State or Federal grants 815 CMR 2.00) (Attach RFR and Response or other procurement supporting documentation) <input type="checkbox"/> <u>Emergency Contract</u> (Attach justification for emergency, scope, budget) <input type="checkbox"/> <u>Contract Employee</u> (Attach <u>Employment Status Form</u> , scope, budget) <input type="checkbox"/> <u>Legislative/Legal or Other:</u> (Attach authorizing language/justification, scope and budget)		Enter Current Contract End Date <u>Prior</u> to Amendment: 05/31/2016 Enter Amendment Amount: \$ _____. (or "no change") AMENDMENT TYPE: (Check one option only. Attach details of Amendment changes.) <input type="checkbox"/> <u>Amendment to Scope or Budget</u> (Attach updated scope and budget) <input type="checkbox"/> <u>Interim Contract</u> (Attach justification for Interim Contract and updated scope/budget) <input type="checkbox"/> <u>Contract Employee</u> (Attach any updates to scope or budget) <input type="checkbox"/> <u>Legislative/Legal or Other:</u> (Attach authorizing language/justification and updated scope and budget)	
The following COMMONWEALTH TERMS AND CONDITIONS (T&C) has been executed, filed with CTR, and is incorporated by reference into this Contract. <input checked="" type="checkbox"/> <u>Commonwealth Terms and Conditions</u> <input type="checkbox"/> <u>Commonwealth Terms and Conditions For Human and Social Services</u>			
COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00. <input checked="" type="checkbox"/> <u>Rate Contract</u> (No Maximum Obligation. Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.) <input type="checkbox"/> <u>Maximum Obligation Contract</u> Enter Total Maximum Obligation for total duration of this Contract (or <u>new</u> Total if Contract is being amended). \$ _____.			
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days <u>2</u> % PPD; Payment issued within 15 days <u>1.5</u> % PPD; Payment issued within 20 days <u>1.25</u> % PPD; Payment issued within 30 days <u>1</u> % PPD. If PPD percentages are left blank, identify reason: <u>agree to standard 45 day cycle</u> <input type="checkbox"/> <u>statutory/legal</u> or Ready Payments (<u>G.L. c. 29, § 23A</u>); <input type="checkbox"/> <u>only initial payment</u> (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)			
BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: Statewide Contract FAC64 – Security, Surveillance, Monitoring, and Access Control Systems, is being renewed through May 31, 2018. No changes in contract scope, terms, conditions, or pricing are allowed as part of this contract renewal.			
ANTICIPATED START DATE: (Complete ONE option only) The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations: <input checked="" type="checkbox"/> 1. may be incurred as of the <u>Effective Date</u> (latest signature date below) and <u>no</u> obligations have been incurred <u>prior</u> to the <u>Effective Date</u> . <input type="checkbox"/> 2. may be incurred as of _____, 20____, a date <u>LATER</u> than the <u>Effective Date</u> below and <u>no</u> obligations have been incurred <u>prior</u> to the <u>Effective Date</u> . <input type="checkbox"/> 3. were incurred as _____, 20____, a date <u>PRIOR</u> to the <u>Effective Date</u> below, and the parties agree that payments for any obligations incurred prior to the <u>Effective Date</u> are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.			
CONTRACT END DATE: Contract performance shall terminate as of <u>May 31, 2018</u> , with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.			
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor makes all certifications required under the attached <u>Contractor Certifications</u> (incorporated by reference if not attached hereto) under the pains and penalties of perjury, agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable <u>Commonwealth Terms and Conditions</u> , this Standard Contract Form including the <u>Instructions and Contractor Certifications</u> , the Request for Response (RFR) or other solicitation, the Contractor's Response, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in <u>801 CMR 21.07</u> , incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.			
AUTHORIZING SIGNATURE FOR THE CONTRACTOR: X: _____ Date: <u>3-14-2016</u> (Signature and Date Must Be Handwritten At Time of Signature) Print Name: <u>Joseph H. Badio</u> Print Title: <u>President / CEO</u>		AUTHORIZING SIGNATURE FOR THE COMMONWEALTH: X: _____ Date: <u>3/15/2016</u> (Signature and Date Must Be Handwritten At Time of Signature) Print Name: <u>Kathleen Reilly</u> Print Title: <u>Deputy State Purchasing Agent</u>	



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 Department Head: Rene Fielding, Director

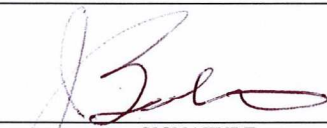


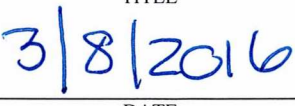
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APPROVED:

ASSENTED TO (IF APPLICABLE):

 Mayor

 Surety Company:
 By: Attorney-in-Fact

(Affix Surety Company Corporate Seal)

CERTIFICATE OF AUTHORITY

(For Corporations Only)

03/06/2016

(Current Date)

At a meeting of the Directors of the LAN-TEL Communications, Inc.

(Name of Corporation)

duly called and held at Norwood, MA

(Location of Meeting)

on the 6 day of March 2016 at which a quorum was present and acting,

it was VOTED, that Joseph H. Bodio

(Name)

the President/CEO of this corporation is hereby

(Position)

authorized and empowered to make, enter into, sign, seal and deliver in behalf of this corporation

a contract for Annual enhancements to the MBHSR CIMS camera system

(Describe Service)

with the City of Boston, and a performance bond in connection with said contract.

I do hereby certify that the above is a true and correct copy of the record that said vote

has not been amended or repealed and is in full force and effect as of this date, and that

Joseph H. Bodio

(Name)

is the duly elected President/CEO of this

(Position)

corporation.

Attest: Christine M. McKeown

(Affix Corporate Seal Here)

Kate Walczon

(Clerk) (Secretary) of the Corporation

APPROVED AS TO FORM BY CORPORATION COUNSEL FEBRUARY, 1998
THIS FORM IS VOID AND WITHOUT LEGAL EFFECT IF ALTERED IN ANY WAY