



STATE OF UTAH CONTRACT

1. CONTRACTING PARTIES: This contract is between the following agency of the State of Utah:
 Department Name: Environmental Quality Agency Code: 480 Division Name: _____, referred to as (STATE),
 and the following CONTRACTOR:

Southwest Utah Public Health Department
 Name
20 South 400 East
 Address
St. George Utah 84501
 City State Zip

LEGAL STATUS OF CONTRACTOR
 Sole Proprietor
 Non-Profit Corporation
 For-Profit Corporation
 Partnership
 Government Agency

Contact Person Dr. David Blodgett Phone #435-986-2587 Email dblodgett@swuhealth.org
 Vendor #31716D Commodity Code #92535

2. GENERAL PURPOSE OF CONTRACT: The general purpose of this contract is to provide:
 Environmental Services as described in attached workplan.
3. PROCUREMENT: This contract is entered into as a result of the procurement process on RX# NA, FY _____,
 Bid# N/A or a pre-approved sole source authorization (from the Division of Purchasing) # SSN/A.
4. CONTRACT PERIOD: Effective Date: July 1, 2013 Termination Date: June 30, 2014 unless terminated early or extended in
 accordance with the terms and conditions of this contract. Renewal options (if any): N/A. All payments under this contract will be
 completed within 90 days after the Termination Date.
5. CONTRACT COSTS: CONTRACTOR will be paid a maximum of \$110,932 for costs authorized by this contract. Additional
 information regarding costs: Payments will be made in quarterly installments on August 1, November 1, February 1, and May 1 of the
applicable fiscal year.
6. ATTACHMENT A: Division of Purchasing's Standard Terms and Conditions
 ATTACHMENT B: Service Delivery Plan
 ATTACHMENT C: Digital Signature Clause
 ATTACHMENT D: N/A
Any conflicts between Attachment A and other Attachments will be resolved in favor of Attachment A.
7. DOCUMENTS INCORPORATED INTO THIS CONTRACT BY REFERENCE BUT NOT ATTACHED:
 - a. All other governmental laws, regulations, or actions applicable to the goods and/or services authorized by this contract.
 - b. Utah State Procurement Code, Procurement Rules, and CONTRACTOR'S response to Bid # N/A dated _____.

IN WITNESS WHEREOF, the parties sign and cause this contract to be executed.

CONTRACTOR

STATE

[Signature] MD 5-12-2013
 Contractor's signature Date

[Signature] 5/21/2013
 Agency's signature Date

David Blodgett MD Health Officer
 Type or Print Name and Title

[Signature] _____ Date
 Director, Division of Purchasing
 RECEIVED BY **JUN 17 2013**
 DIVISION OF FINANCE
 Director, Division of Finance

<u>Renette Anderson</u>	<u>801-536-4478</u>	<u>801-536-4441</u>	<u>renetteanderson@utah.gov</u>
Agency Contact Person	Telephone Number	Fax Number	Email