

**Supplemental Agreement No. 1
For
Vendor Services**

**Overland Park Soccer Complex
Digital Signage/Display System
(PR-1085)**

City of Overland Park, Kansas

This Supplemental Agreement made this _____ day of _____, 2009, by and between the City of Overland Park, Kansas, hereinafter called the "CITY", and **Key West Technology, Inc.**, hereinafter called the "VENDOR".

WHEREAS, the CITY and the VENDOR have previously entered into an Agreement dated, **June 18, 2009** to purchase a digital signage/display system including equipment, installation of equipment, programming, and software installation and configuration (the "Project"); and

WHEREAS, the CITY desires to obtain additional equipment related to the Project, specifically **for the purpose of increasing capabilities to send and receive digital information through the City's fiber optic system (the "Additional Equipment")** ; and

WHEREAS, the VENDOR is willing to provide the Additional Equipment in accordance with Exhibit A of this Supplemental Agreement; and

WHEREAS, the parties desire to enter into a Supplemental Agreement for the VENDOR to supply the Additional Equipment and for the City to pay the VENDOR for Additional Equipment supplied; and

WHEREAS, the CITY is authorized and empowered to contract with the VENDOR for the necessary Additional Equipment related to the Project, and necessary funds for the payment of said services are available.

NOW THEREFORE, the parties hereby agree as follows:

PART A - BASIC VENDOR AGREEMENT

The VENDOR will provide the Additional Equipment in accordance with Exhibit A of this Supplemental Agreement.

PART B - SCHEDULE

The VENDOR will provide the Additional Equipment as follows:

All work shown in Exhibit A of this Supplemental Agreement shall be completed by **August 15, 2009**.

PART C - PAYMENT TO THE VENDOR FOR SERVICES RENDERED

The Additional Equipment and any related services listed in Exhibit A of this Supplemental Agreement No. 1 will be provided at an amount not to exceed **nine thousand nine hundred ninety-five and 00/100 dollars (\$9,995.00) including reimbursables**.

This Supplemental Agreement raises the maximum fee to **forty-nine thousand two hundred fifteen and 00/100 dollars (\$49,215.00)** for the Project. This is the total of the original fee of **\$39,220.00** plus **\$9,995.00** for Supplemental Agreement No. 1.

IN ALL OTHER RESPECTS, the terms and conditions of **the June 18, 2009** Agreement shall remain in full force and effect, except as specifically modified by this Supplemental Agreement, including all policies of insurance which shall cover the work authorized by this Supplemental Agreement.

IN WITNESS WHEREOF, the parties hereto have caused this Supplemental Agreement to be executed as of the day and year first above written.

Key West Technology Inc.

THE CITY OF OVERLAND PARK, KANSAS

Danny Cates
Systems Engineer

Carl Gerlach
Mayor

APPROVED AS TO FORM:

ATTEST:

Tammy M. Owens
Senior Assistant City Attorney

Marian Cook
City Clerk

EXHIBIT A



14563 W. 96th Terrace
 Lenexa, KS 66215-1165
 Telephone: 913.492.4666
 Fax: 913.322.1864

Quote

Date	Quote #
7/15/2009	QB00001724

Name / Address
The City of Overland Park City Hall 8500 Santa Fe Drive Overland Park, KS 66212

Ship To
The City of Overland Park City Hall 8500 Santa Fe Drive Overland Park, KS 66212

Item	Description	Qty	Ship Via	
			Cost	Total
	Terms	Rep		
	50% Dep/Balance after install	SYSTE		
FIBER7250 RXTX	Fiberlink 7250 transmitter/receiver pair. Transmits high resolution RGB (up to WUXGA) and stereo audio using two single mode or multimode fiber optic cores at 1310 nm wavelength (Two external power supplies incl.)	3	3,300.00	9,900.00
MXS-CABLE	Two ea. male to male 30' HDMI cables.	1	95.00	95.00

Quotation is valid for 30 Days from the date of issue.	Total	\$9,995.00
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ACORD™ CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YY) 06/23/2009
PRODUCER CHARLES D. WILLIAMS & CO 4121 WEST 83RD ST, STE 156 PRAIRIE VILLAGE, KS 66208 (913)648-7007	913-648-7007	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURED KEYWEST TECHNOLOGY, INC 14563 W. 96TH STREET LENEXA, KS 66215		INSURERS AFFORDING COVERAGE INSURER A: HARTFORD CASUALTY INSURANCE CO INSURER B: INSURER C: INSURER D: INSURER E:
		NAIC#

COVERAGES Serial # 100347

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

NSR	ADDL	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	37SBAKK8292	6-06-09	6-06-10	EACH OCCURRENCE \$ 1,000,000
		GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	37SBAKK8292	6-6-09	6-6-10	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
A		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$	37SBAKK8292	6-6-09	6-6-10	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
		WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER EL EACH ACCIDENT \$ EL DISEASE - EA EMPLOYEE \$ EL DISEASE - POLICY LIMIT \$
		OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENTS/SPECIAL PROVISIONS
 CERTIFICATE HOLDER IS SHOWN AS ADDITIONAL INSURED FOR **GENERAL LIABILITY & AUTOMOBILE LIABILITY**
 HARTFORD IS LICENSED TO DO BUSINESS IN THE STATE OF KANSAS AND HAS A BEST'S RATING OF A+, XV

PR-1085

CERTIFICATE HOLDER CITY OF OVERLAND PARK 8500 SANTA FE DRIVE OVERLAND PARK, KS 66212 ATTEN: NANCY SAPPINGTON	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/23/2009

PRODUCER (913) 345-0440 FAX: (913) 345-2608 Bukaty Property & Casualty Services Inc. 11221 Roe Avenue Leawood KS 66211 INSURED Keywest Technology, Inc 14563 W 96th Ter SHAWNEE MISSION KS 66215	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURERS AFFORDING COVERAGE INSURER A: CNA Insurance Co INSURER B: INSURER C: INSURER D: INSURER E:	NAIC # 99999

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (EA Occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
	EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below	4017408151	6/1/2009	6/1/2010	<input checked="" type="checkbox"/> NO STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
	OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

CANCELLATION

CITY OF OVERLAND PARK PUBLIC WORKS DEPARTMENT CONTRACT SPECIALIST NANCY SAPPINGTON 8500 SANTA FE DRIVE OVERLAND PARK, KS 66212	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE Peggy Farquhar/PEGGY
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