

THE STATE OF TEXAS §

COUNTY OF WILLIAMSON §

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**SERVICES CONTRACT  
FOR  
MEDICAL WASTE  
DISPOSAL SERVICES  
(Williamson County EMS)**

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**THIS SERVICES CONTRACT** (hereinafter "Contract") is made and entered into by and between **Williamson County, Texas** (hereinafter "The County"), a political subdivision of the State of Texas, acting herein by and through its governing body, and **AdvoWaste Medical Services, LLC**, (hereinafter "Service Provider"), whose home office is located at 18444 N. 25th Avenue #420, Phoenix, AZ 85023. The County agrees to engage Service Provider as an independent contractor, to assist in providing certain operational services pursuant to the following terms, conditions, and restrictions:

**I.**

**Services:** Service Provider shall provide services *as an independent contractor* pursuant to terms and policies of the Williamson County Commissioners Court. Service Provider expressly acknowledges that he, she or it is not an employee of The County. The services include, but are not limited to the following items in order to complete the project:

- A. As described in the attached Service Provider "Medical Waste Disposal Service Agreement," which is marked as Exhibit "A" and incorporated herein as if copied in full.**

Should The County choose to add services in addition to those described in Exhibit "A", such additional services shall be described in a separate written amendment to this Contract wherein the additional services shall be described and the parties shall set forth the amount of compensation to be paid by The County for the additional services. Service Provider shall not begin any additional services and The County shall not be obligated to pay for any additional services unless a written amendment to this Contract has been signed by both parties.

## II.

**Effective Date and Term:** This contract shall be in full force and effect when signed by all parties and shall continue for a reasonable time for the specific project and shall terminate upon project completion or when terminated pursuant to paragraph X below.

## III.

**Consideration and Compensation:** Service Provider will be compensated based on fees and costs sets forth in **Exhibit "A"**, **unless amended by a change order and approved by the Williamson County Commissioners Court.** Payment for goods and services shall be governed by Chapter 2251 of the Texas Government Code. An invoice shall be deemed overdue the 31st day after the later of (1) the date The County receives the goods under the contract; (2) the date the performance of the service under the contract is completed; or (3) the date the Williamson County Auditor receives an invoice for the goods or services. Interest charges for any overdue payments shall be paid by The County in accordance with Texas Government Code Section 2251.025. More specifically, the rate of interest that shall accrue on a late payment is the rate in effect on September 1 of The County's fiscal year in which the payment becomes due. The said rate in effect on September 1 shall be equal to the sum of one percent (1%); and (2) the prime rate published in the Wall Street Journal on the first day of July of the preceding fiscal year that does not fall on a Saturday or Sunday.

## IV.

**Insurance:** Service Provider shall provide and maintain, until the services covered in this Contract is completed and accepted by The County, the minimum insurance coverage in the minimum amounts as described below. Coverage shall be written on an occurrence basis by companies authorized and admitted to do business in the State of Texas and rated A- or better by A.M. Best Company or otherwise acceptable to The County and name The County as an additional insured.

Type of Coverage	Limits of Liability
a. Worker's Compensation	Statutory
b. Employer's Liability	
Bodily Injury by Accident	\$500,000 Ea. Accident
Bodily Injury by Disease	\$500,000 Ea. Employee
Bodily Injury by Disease	\$500,000 Policy Limit

- c. Comprehensive general liability including completed operations and contractual liability insurance for bodily injury, death, or property damages in the following amounts:

COVERAGE	PER PERSON	PER OCCURRENCE
Comprehensive General Liability <i>(including premises, completed operations and contractual)</i>	\$ 500,000	\$ 500,000
Aggregate policy limits:		\$1,000,000

Service Provider, as an independent contractor, meets the qualifications of an "Independent Contractor" under Texas Worker's Compensation Act, Texas Labor Code, Section 406.141, and must provide its employees, agents and sub-subcontractors worker's compensation coverage. Contactor shall not be entitled to worker's compensation coverage or any other type of insurance coverage held by The County.

Upon execution of this Contract, Service Provider shall provide The County with insurance certificates evidencing compliance with the insurance requirements of this Contract.

V.

**Entire Contract & Incorporated Documents:** This Contract constitutes the entire Contract between the parties and may not be modified or amended other than by a written instrument executed by both parties. Documents expressly incorporated (as if copied in full) into this Contract include the following:

**A. As described in the attached Service Provider "Medical Waste Disposal Service Agreement," which are marked as Exhibit "A" and incorporated herein as if copied in full; and**

**B. Any required insurance certificates evidencing required coverages.**

The County reserves the right and discretion (pursuant to public policy and Texas Constitutional principles) to determine applicable provisions where there is any conflict between this Contract and any of the above-referenced contract documents/exhibits or incorporated documents.

## VI.

**No Agency Relationship & Indemnification:** It is understood and agreed that Service Provider shall not in any sense be considered a partner or joint venturer with The County, nor shall Service Provider hold himself out as an agent or official representative of The County unless expressly authorized to do so by a majority of the Williamson County Commissioners Court. Service Provider shall be considered an independent contractor for the purpose of this Contract and shall in no manner incur any expense or liability on behalf of The County other than what may be expressly allowed under this Contract. The County will not be liable for any loss, cost, expense or damage, whether indirect, incidental, punitive, exemplary, consequential of any kind whatsoever for any acts by Service Provider or failure to act relating to the services being provided.

## VII.

**INDEMNIFICATION - EMPLOYEE PERSONAL INJURY CLAIMS:** TO THE FULLEST EXTENT PERMITTED BY LAW, THE SERVICE PROVIDER SHALL INDEMNIFY, DEFEND (WITH COUNSEL OF THE COUNTY'S CHOOSING), AND HOLD HARMLESS THE COUNTY, AND THE COUNTY'S EMPLOYEES, AGENTS, REPRESENTATIVES, PARTNERS, OFFICERS, AND DIRECTORS (COLLECTIVELY, THE "INDEMNITEES") AND SHALL ASSUME ENTIRE RESPONSIBILITY AND LIABILITY (OTHER THAN AS A RESULT OF INDEMNITEES' GROSS NEGLIGENCE) FOR ANY CLAIM OR ACTION BASED ON OR ARISING OUT OF THE PERSONAL INJURY, OR DEATH, OF ANY EMPLOYEE OF THE SERVICE PROVIDER, OR OF ANY SUBCONTRACTOR, OR OF ANY OTHER ENTITY FOR WHOSE ACTS THEY MAY BE LIABLE, WHICH OCCURRED OR WAS ALLEGED TO HAVE OCCURRED ON THE WORK SITE OR IN CONNECTION WITH THE PERFORMANCE OF THE WORK. SERVICE PROVIDER HEREBY INDEMNIFIES THE INDEMNITEES EVEN TO THE EXTENT THAT SUCH PERSONAL INJURY WAS CAUSED OR ALLEGED TO HAVE BEEN CAUSED BY THE SOLE, COMPARATIVE OR CONCURRENT NEGLIGENCE OF THE STRICT LIABILITY OF ANY INDEMNIFIED PARTY. THIS INDEMNIFICATION SHALL NOT BE LIMITED TO DAMAGES, COMPENSATION, OR BENEFITS PAYABLE UNDER INSURANCE POLICIES, WORKERS COMPENSATION ACTS, DISABILITY BENEFITS ACTS, OR OTHER EMPLOYEES BENEFIT ACTS.

**INDEMNIFICATION - OTHER THAN EMPLOYEE PERSONAL INJURY CLAIMS:** TO THE FULLEST EXTENT PERMITTED BY LAW, SERVICE PROVIDER SHALL INDEMNIFY, DEFEND (WITH COUNSEL OF THE COUNTY'S CHOOSING), AND HOLD HARMLESS THE COUNTY, AND THE COUNTY'S EMPLOYEES, AGENTS, REPRESENTATIVES, PARTNERS, OFFICERS, AND DIRECTORS (COLLECTIVELY, THE "INDEMNITEES") FROM AND AGAINST CLAIMS, DAMAGES, LOSSES AND EXPENSES, INCLUDING BUT NOT LIMITED TO ATTORNEYS' FEES, ARISING OUT OF OR ALLEGED TO BE RESULTING FROM THE PERFORMANCE OF THIS AGREEMENT OR THE WORK DESCRIBED HEREIN, TO THE EXTENT CAUSED BY THE NEGLIGENCE, ACTS, ERRORS, OR OMISSIONS OF SERVICE PROVIDER OR ITS SUBCONTRACTORS, ANYONE EMPLOYED BY THEM OR ANYONE FOR WHOSE ACTS THEY MAY BE LIABLE, REGARDLESS OF WHETHER OR NOT SUCH CLAIM, DAMAGE, LOSS OR EXPENSE IS CAUSED IN WHOLE OR IN PART BY A PARTY INDEMNIFIED HEREUNDER.

## VIII.

**No Waiver of Sovereign Immunity or Powers:** Nothing in this Contract will be deemed to constitute a waiver of sovereign immunity or powers of The County, the Williamson County Commissioners Court, or the Williamson County Judge.

**IX.**

**Compliance with All Laws:** Service Provider agrees and will comply with any and all local, state or federal requirements with respect to the services rendered.

**X.**

**Termination:** This Contract may be terminated at any time at the option of either party, without future or prospective liability for performance upon giving thirty (30) days written notice thereof.

**XI.**

**Venue and Applicable Law:** Venue of this Contract shall be Williamson County, Texas, and the laws of the State of Texas shall govern all terms and conditions.

**XII.**

**Severability:** In case any one or more of the provisions contained in this Contract shall for any reason be held to be invalid, illegal, or unenforceable in any respect, such invalidity, illegality, or unenforceability shall not affect any other provision in this Contract and this Contract shall be construed as if such invalid, illegal, or unenforceable provision had never been contained in it.

**XIII.**

**Right to Audit:** Service Provider agrees that The County or its duly authorized representatives shall, until the expiration of three (3) years after final payment under this Contract, have access to and the right to examine and photocopy any and all books, documents, papers and records of Service Provider which are directly pertinent to the services to be performed under this Contract for the purposes of making audits, examinations, excerpts, and transcriptions. Service Provider agrees that The County shall have access during normal working hours to all necessary Service Provider facilities and shall be provided adequate and appropriate work space in order to conduct audits in compliance with the provisions of this section. The County shall give Service Provider reasonable advance notice of intended audits.

**XIV.**

**Confidentiality:** Service Provider expressly agrees that he or she will not use any incidental confidential information that may be obtained while working in a governmental setting for his or her own benefit, and agrees that he or she will not enter any unauthorized areas or access confidential information and he or she will not disclose any information to unauthorized third parties, and will take care to guard the security of the information at all times.

**XV.**

**Good Faith Clause:** Service Provider agrees to act in good faith in the performance of this Contract.

**XVI.**

**No Assignment:** Service Provider may not assign this Contract.

**XVII.**

**County Judge or Presiding Officer Authorized to Sign Contract:** The presiding officer of The County's governing body who is authorized to execute this instrument by order duly recorded may execute this Contract on behalf of The County.

WITNESS that this Contract shall be effective as of the date of the last party's execution below.

**WILLIAMSON COUNTY:**

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Printed Name

Date: \_\_\_\_\_, 2017

**SERVICE PROVIDER:**

  
\_\_\_\_\_  
Authorized Signature

  
\_\_\_\_\_  
Printed Name

Date: May 18<sup>th</sup>, 2017

**Exhibit "A"**  
**(Incorporated herein as if copied in full)**



DOT# 25570006  
ADEQ LICENSE# TR150123.00

18444 N. 25th Avenue #420 • Phoenix, AZ 85023  
P: 602.734.2802 F: 602.718.1215  
E: info@advowastemedical.com

www.advowastemedical.com

## MEDICAL WASTE DISPOSAL SERVICE AGREEMENT EXHIBIT A

### Service Address

### Billing Address (if different than service address)

Name: Williamson County EMS	Name: Williamson County EMS
Address: 2604 Northlawn Dr., Taylor TX 76574	Address: PO Box 873, Georgetown TX 78627
Phone: 512-943-1264	Phone: 512-943-1264
Email: jjsbell@wilco.org	Email: jjsbell@wilco.org
Contact: Jeff Isbell	Contact: Jeff Isbell

### SERVICES PROVIDED

Service Frequency: ☐ Weekly ☐ Bi Weekly ☒ Monthly ☐ Bi Monthly ☐ Quarterly

☐ Other: \_\_\_\_\_

Request Service Start Date: \_\_\_\_\_

Service Charge: \$ \_\_\_\_\_

Comments: Red bags, boxes and 30 GI containers included free.  
No rescheduling fee-no fuel surcharges- no other fees.  
We offer complete OSHA compliance training

### TERMS AND CONDITIONS

- ADVOWASTE MEDICAL SERVICES LLC (hereinafter referred to as SERVICE PROVIDER) agrees to provide removal and disposal services for all treated and non-treated Regulated Medical Waste at aforementioned customer facility at location indicated above. Service Provider shall dispose of all materials in compliance with all Federal State and local regulatory guidelines and requirements.
- OBLIGATIONS OUTLINED IN THIS CONTRACT shall be binding on both parties as of service dated listed below and shall continue for a period of two (2) years from the date of execution of this agreement unless terminated per paragraph X as stated in this Services Contract for Medical Waste Disposal Services Williamson County EMS.
- CUSTOMER HEREBY agrees to pay for the services provided hereunder in accordance with the rates and charges set forth herein at \$49.00 per 30gl container.
- CUSTOMER SHALL NOT TO TENDER to Service Provider any hazardous material or hazardous waste, as those terms are used and defined in applicable Federal, State and local codes, guidelines, laws, regulations and Acts, including but not limited to radioactive, volatile explosive or toxics substances. Customer agrees to indemnify, defend and hold harmless Service Provider and its officers, employees, agents and insurers, against all claims, liabilities, losses, fines, reasonable attorney fees and other expenses arising out of or related to the release of such hazardous material, including without limitation, fines or expenses related to the removal or treatment of hazardous material or other remedial action pertaining to the hazardous material under federal or state law.

CUSTOMER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

ADVOWASTE AGENT SIGNATURE Sarah Novoseller DATE \_\_\_\_\_

THIS CONTRACT IS TERMINABLE WITHOUT PENALTY AT ANY TIME BY CUSTOMER



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## MEDICAL WASTE DISPOSAL SERVICE AGREEMENT EXHIBIT A

### Service Address

### Billing Address (if different than service address)

Name: Williamson County EMS	Name: Williamson County EMS
Address: 150 Church Park Rd. Cedar Park TX 78613	Address: PO Box 873, Georgetown TX 78627
Phone: 512-943-1264	Phone: 512-943-1264
Email: jisbell@wilco.org	Email: jisbell@wilco.org
Contact: Jeff Isbell	Contact: Jeff Isbell

### SERVICES PROVIDED

Service Frequency: ☐ Weekly ☐ Bi Weekly ☒ Monthly ☐ Bi Monthly ☐ Quarterly

☐ Other: \_\_\_\_\_

Request Service Start Date: \_\_\_\_\_

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CUSTOMER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

ADVOWASTE AGENT SIGNATURE Sarah Novoseller DATE \_\_\_\_\_

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### Billing Address (if different than service address)

Name: Williamson County EMS	Name: Williamson County EMS
Address: 1781 E Old Settlers Blvd.Suite 105, Round Rock TX 78664	Address: PO Box 873, Georgetown TX 78627
Phone: 512-943-1264	Phone: 512-943-1264
Email: jisbell@wilco.org	Email:jisbell@wilco.org
Contact: Jeff Isbell	Contact: Jeff Isbell

### SERVICES PROVIDED

Service Frequency: ☐ Weekly ☐ Bi Weekly ☒ Monthly ☐ Bi Monthly ☐ Quarterly

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CUSTOMER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

ADVOWASTE AGENT SIGNATURE Sarah Novoseller \_\_\_\_\_ DATE \_\_\_\_\_

THIS CONTRACT IS TERMINABLE WITHOUT PENALTY AT ANY TIME BY CUSTOMER