



Office of Purchasing
Staff Summary A-23-2023

Subject: Custom Interface for Text to 911 conversion into our CAD system (RQPD23000277)
Department: Department of Shared Services / Office of Purchasing
Department Head Name: Melissa Gallucci
Department Head Signature: <i>Alison Malhome</i> Deputy Commissioner of Shared Services

Date: July 26, 2023
Vendor Name: Intergraph Corporation
Contract Number: A-23-2023
Contract Manager Name: Timothy Funaro

Proposed Legislative Action					
	To	Date	Approval	Info	Other
	Assgn Comm				
	Rules Comm				
	Full Leg				

Internal Approvals			
Date & Init.	Approval	Date & Init.	Approval
7/26/23	Dept. Head	7/26/23	Counsel to C.E. CPCO
	Budget	7/31/2023	County Atty.
	Deputy C.E.	7/31/23	County Exec.

Narrative

Purpose: To authorize and award a purchase order for a custom interface for text to 911. This interface will automatically transfer text message 911 related information into the Police Department's current Computer Aided Dispatch system.

Discussion: This is a sole source purchase; The interface is essential to ensure there are no delays in emergency response due to 911 call takers having to re-enter the textual information received on the 911 vesta telephone system into the Hexagon CAD system. As a result of a lawsuit, Judge Joan M Azrack, United States District Court Judge for the Eastern District of New York, ruled that Nassau County will be non-compliant with the lawsuit settlement if Text to 911 is not implemented before the next hearing scheduled for September 15, 2023.

Impact on Funding: The maximum amount authorized under this purchase order is One Hundred and Six Thousand Four hundred and seventeen Dollars and zero Cents (\$106,417.00)

Recommendation: Department of Shared Services, Office of Purchasing, recommends approving this Purchase Order with Intergraph Corporation as the sole source provider.

APPROVED:

J. Imato 7/31/23

INSURANCE SECTION

REAL ESTATE, TAX, AND
 INSURANCE SECTION

2023 JUL 31 P 5:18

CLERK OF THE LEGAL
 NASSAU COUNTY

RULES RESOLUTION

A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY POLICE DEPARTMENT, AND INTERGRAPH CORPORATION.

WHEREAS, the NASSAU COUNTY DEPARTMENT OF SHARED SERVICES, OFFICE OF PURCHASING is representing to the Rules Committee that the firm Intergraph Corporation is a sole source provider and meet all specifications for the service described in the said contract as determined by the Commissioner of shared Services.

RESOLVED, that the Rules Committee of the Nassau County Legislature authorizes the Commissioner of Shared Services to award and execute the said Purchase Order with Intergraph Corporation.

COUNTY OF NASSAU
INTER – DEPARTMENTAL MEMO

TO: CLERK OF THE COUNTY LEGISLATURE

A-23-2023


FROM: MELISSA GALLUCCI - COMMISSIONER OF SHARED SERVICES

DATE: July 26, 2023

SUBJECT: RESOLUTION – THE NASSAU COUNTY POLICE DEPARTMENT

THIS RESOLUTION IS RECOMMENDED BY THE COMMISSIONER OF SHARED SERVICES TO AUTHORIZE AN AWARD AND TO EXECUTE A PURCHASE ORDER IN THE AMOUNT OF ONE HUNDRED and SIX THOUSAND FOUR HUNDRED and SEVENTEEN DOLLARS and SIX CENTS (\$106,417.06) ON BEHALF OF THE NASSAU COUNTY POLICE DEPARTMENT TO INTERGRAPG CORPORATION FOR CUSTOM INTERFACE FOR TEXT TO THE 911 CONVERSION INTO THE POLICE DEPARTMENT'S CAD SYSTEM.

THE ABOVE DESCRIBED RESOLUTION AND SUPPORTING DOCUMENTATION ATTACHED HERETO IS FORWARDED FOR YOUR REVIEW, APPROVAL, AND SUBSEQUENT TRANSMITTAL TO THE RULES COMMITTEE FOR INCLUSION IN ITS AGENDA.


MELISSA GALLUCCI *Allison E Mathamz*
COMMISSIONER OF SHARED SERVICES
Deputy Commissioner

MS: br

ENCL: (1) STAFF SUMMARY
(2) DISCLOSURE STATEMENT
(3) RESOLUTION
(4) BID SUMMARY
(5) BID PROPOSAL
(6) CERTIFICATE OF LIABILITY INSURANCE
(7) RECOMMENDATION OF AWARD
(8) POLITICAL CONTRIBUTION FORM





BRUCE A. BLAKEMAN
COUNTY EXECUTIVE

MELISSA GALLUCCI
COMMISSIONER OF SHARED SERVICES

**COUNTY OF NASSAU
SHARED SERVICES
1 WEST STREET
MINEOLA, NEW YORK 11501-4894**

Date: July 31, 2023
To: Robert Cleary, Chief Procurement Officer
From: Claudia Colasurdo, Technical Coordinator II, Office of Purchasing

Re: Adverse information memo
Staff Summary A-23-23 Intergraph Corporation

Adverse information that was uncovered was:

On the Business History form, the vendor answered yes to items #10 and #16. Upon review we found that there is no basis for finding this vendor "Intergraph Corporation" not responsible.



COUNTY OF NASSAU

POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE FORM

1. Has the vendor or any corporate officers of the vendor provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator?

YES ☐ NO ☒ If yes, to what campaign committee?

Electronically signed and certified at the date and time indicated by:
Victor S. Vasile [VICTOR.VASILE@HEXAGONSI.COM]

Dated: 05/04/2023 03:12:31 pm

Vendor: Intergraph Corporation

Title: Regional Divisional Counsel



COUNTY OF NASSAU

LOBBYIST REGISTRATION AND DISCLOSURE FORM

1. Name, address and telephone number of lobbyist(s)/lobbying organization. The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties.

None

2. List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State):

None

3. Name, address and telephone number of client(s) by whom, or on whose behalf, the lobbyist is retained, employed or designated:

None

4. Describe lobbying activity conducted, or to be conducted, in Nassau County, and identify client(s) for each activity listed. See the last page for a complete description of lobbying activities.

None

5. The name of persons, organizations or governmental entities before whom the lobbyist expects to lobby:

None

6. If such lobbyist is retained or employed pursuant to a written agreement of retainer or employment, you must attach a copy of such document; and if agreement of retainer or employment is oral, attach a written statement of the substance thereof. If the written agreement of retainer or employment does not contain a signed authorization from the client by whom you have been authorized to lobby, separately attach such a written authorization from the client.

7. Has the lobbyist/lobbying organization or any of its corporate officers provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator?

YES [] NO [X] If yes, to what campaign committee? If none, you must so state:

I understand that copies of this form will be sent to the Nassau County Department of Information Technology ("IT") to be posted on the County's website.

I also understand that upon termination of retainer, employment or designation I must give written notice to the County Attorney within thirty (30) days of termination.

VERIFICATION: The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.

The undersigned further certifies and affirms that the contribution(s) to the campaign committees listed above were made freely and without duress, threat or any promise of a governmental benefit or in exchange for any benefit or remuneration.

Electronically signed and certified at the date and time indicated by:
Victor S. Vasile [VICTOR.VASILE@HEXAGONSI.COM]

Dated: 05/23/2023 05:37:21 pm

Vendor: Intergraph Corporation

Title: Regional Divisional Counsel

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including but not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

The term "lobbying" or "lobbying activities" does not include: Persons engaged in drafting legislation, rules, regulations or rates; persons advising clients and rendering opinions on proposed legislation, rules, regulations or rates, where such professional services are not otherwise connected with legislative or executive action on such legislation or administrative action on such rules, regulations or rates; newspapers and other periodicals and radio and television stations and owners and employees thereof, provided that their activities in connection with proposed legislation, rules, regulations or rates are limited to the publication or broadcast of news items, editorials or other comment, or paid advertisements; persons who participate as witnesses, attorneys or other representatives in public rule-making or rate-making proceedings of a County agency, with respect to all participation by such persons which is part of the public record thereof and all preparation by such persons for such participation; persons who attempt to influence a County agency in an adjudicatory proceeding, as defined by § 102 of the New York State Administrative Procedure Act.

Business History Form

The contract shall be awarded to the responsible proposer who, at the discretion of the County, taking into consideration the reliability of the proposer and the capacity of the proposer to perform the services required by the County, offers the best value to the County and who will best promote the public interest.

In addition to the submission of proposals, each proposer shall complete and submit this questionnaire. The questionnaire shall be filled out by the owner of a sole proprietorship or by an authorized representative of the firm, corporation or partnership submitting the Proposal.

NOTE: All questions require a response, even if response is "none" or "not-applicable." No blanks.

(USE ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER THE FOLLOWING QUESTIONS).

Date: 05/04/2023

1) Proposer's Legal Name: Intergraph Corporation

2) Address of Place of Business: 305 Intergraph Way

City: Madison State/Province/Territory: AL Zip/Postal Code: 35758

Country: US

3) Mailing Address (if different): Same

City: Same State/Province/Territory: AL Zip/Postal Code: 35758

Country: US

Phone: (256) 730-2000

Does the business own or rent its facilities? O If other, please provide details:

4) Dun and Bradstreet number: 05-515-7903

5) Federal I.D. Number: 63-0573222

6) The proposer is a: Corporation (Describe) _____

7) Does this business share office space, staff, or equipment expenses with any other business?

YES [X] NO [] If yes, please provide details:

Share the above at 305 Intergraph Way with Worldwide Services, Inc., Leica Geosystems Inc., and Hexagon EAM Holdings, LLC

- 8) Does this business control one or more other businesses?

YES ☒ NO ☐ If yes, please provide details:

As a multinational corporation, Intergraph has numerous subsidiaries located throughout the world. See attached list for listing of all subsidiaries.

1 File(s) uploaded: Business History Form Question 8 Control (final).pdf

- 9) Does this business have one or more affiliates, and/or is it a subsidiary of, or controlled by, any other business?

YES ☒ NO ☐ If yes, please provide details:

Intergraph is a subsidiary of Hexagon AB. As part of Hexagon, Intergraph has many affiliates. See attached list for listing of the affiliates.

1 File(s) uploaded: Business History Form Question 9 Affiliates (final).pdf

- 10) Has the proposer ever had a bond or surety cancelled or forfeited, or a contract with Nassau County or any other government entity terminated?

YES ☒ NO ☐ If yes, state the name of bonding agency, (if a bond), date, amount of bond and reason for such cancellation or forfeiture: or details regarding the termination (if a contract).

Over the course of its fifty three year history, the affiant is not aware of any of its bonds or sureties having been cancelled.

See attached for list of terminations.

1 File(s) uploaded: Business History Form Question 10.pdf

- 11) Has the proposer, during the past seven years, been declared bankrupt?

YES ☐ NO ☒ If yes, state date, court jurisdiction, amount of liabilities and amount of assets

- 12) In the past five years, has this business and/or any of its owners and/or officers and/or any affiliated business, been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency? And/or, in the past 5 years, have any owner and/or officer of any affiliated business been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency, where such investigation was related to activities performed at, for, or on behalf of an affiliated business.

YES ☐ NO ☒ If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

- 13) In the past 5 years, has this business and/or any of its owners and/or officers and/or any affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies? And/or, in the past 5 years, has any owner and/or officer of an affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies, for matters pertaining to that individual's position at or relationship to an affiliated business.

YES ☐ NO ☒ If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.



Business History Form – Question 8

Entity
Hexagon EAM Holdings, LLC
Hexagon Safety & Infrastructure Ltd.
Hexagon Solutions, Inc.
Hexagon US Federal, Inc.
Intergraph Benelux B.V.
Intergraph China, Inc.
Intergraph CS s.r.o.
Intergraph Denmark A/S
Intergraph de Mexico S.A.
Intergraph Espana, S.A.
Intergraph Ges.m.b.H.
Intergraph Greater China, Ltd.
Intergraph Hellas S.A.
Intergraph Hong Kong Ltd.
Intergraph Improved Properties LLC
Intergraph Investment, LP
Intergraph Israel Software Development Center, Ltd.
Intergraph Italia L.L.C.
Intergraph Korea, Ltd.
Intergraph Polska Sp.z.o.o.
Intergraph (Port)- Sistemas de Computação Grafica, S.A.
Intergraph Process & Building Solutions Philippines, Inc.
Intergraph Process, Power & Marine Ireland Ltd.
Intergraph Process, Power & Offshore (M) SDN Bhd.
Intergraph Process, Power & Offshore Pte, Ltd.
Intergraph Servicios de Venezuela S.C.A.
Intergraph Sverige AB
Intergraph Unimproved Properties LLC
Mappoint Asia
M&S Computing Investments, Inc.
PAS Global, LLC
Transparent Language, Inc.



HEXAGON

Business History Form – Question 9

Affiliates
Clever Together AB
Hexagon Intergraph AB
Hexagon Positioning Intelligence Ltd.
Hexagon Smart Solutions AB
Hexagon Solutions AB
Hexagon Technology Center GmbH
Leica Geosystems AG
Östgötaeken AB
R-evolution AB
Tecla AB



Business History Form - Question 10

Howard County, MD, terminated its contract for default in 2019. That is the only termination of default against Hexagon. Hexagon disputes the allegations in Howard County's notice; and Howard County continues to use Hexagon's software and contract with Hexagon for maintenance. From time to time, Government entities will terminate agreements with Hexagon for their convenience.

Howard County issued its notice of default claiming: the WebRMS software product, that was to be implemented by Hexagon, had defects, it did not meet the County's requirements, and the project that commenced in 2015 had been delayed. Since transmitting the notice in January 2019, Howard County never pursued any legal remedies and applicable statute of limitations has since expired.

With regard to the list of contracts terminated for convenience:

Understanding Intergraph Corporation is a multinational corporation and does not programmatically track situations in which a contract is terminated for convenience, the undersigned provides the following information occurring since January 1, 2017 based upon his personal knowledge:

City of Baltimore, contract dated December 17, 2014
City of Westminster, CO, contract dated December 30, 2014
Fairfax County, VA, Change Order 105 to contract number 4400000309
Louisville / Jefferson County Metropolitan Government, contract dated September 30, 2015
City of Huntsville, AL, contract dated December 17, 2015
City of Glendale, AZ, contract dated January 14, 2019
Valley Emergency Communications Center contract dated September 8, 2016
City of Mountain View, CA, Amendment 1 to contract dated March 23, 2012
City of Elk Grove, CA, contract dated March 27, 2017
San Diego Unified Port District, contract dated September 27, 2017
New York City Department of Information Technology, Contract CT1-858-20151414132
New Jersey Transit, Contract 07-017
Maricopa County, AZ, contract dated February 22, 2012
University of Nebraska Lincoln, contract dated July 17, 2020

- 14) Has any current or former director, owner or officer or managerial employee of this business had, either before or during such person's employment, or since such employment if the charges pertained to events that allegedly occurred during the time of employment by the submitting business, and allegedly related to the conduct of that business:
- a) Any felony charge pending?
YES ☐ NO ☒ If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.
- b) Any misdemeanor charge pending?
YES ☐ NO ☒ If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.
- c) In the past 10 years, you been convicted, after trial or by plea, of any felony and/or any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES ☐ NO ☒ If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.
- d) In the past 5 years, been convicted, after trial or by plea, of a misdemeanor?
YES ☐ NO ☒ If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.
- e) In the past 5 years, been found in violation of any administrative, statutory, or regulatory provisions?
YES ☐ NO ☒ If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.
- 15) In the past (5) years, has this business or any of its owners or officers, or any other affiliated business had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES ☐ NO ☒ If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.
- 16) For the past (5) tax years, has this business failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES ☒ NO ☐ If yes, provide details for each such year. Provide a detailed response to all questions checked 'YES'. If you need more space, photocopy the appropriate page and attach it to the questionnaire.
- As a multinational corporation with operations throughout the world, from time to time, Intergraph discovers it has not timely addressed a valid tax liability. Once it becomes aware of such issue, it quickly addresses such valid tax liabilities.
- 17) Conflict of Interest:
- a) Please disclose any conflicts of interest as outlined below. NOTE: If no conflicts exist, please expressly state "No conflict exists."
- (i) Any material financial relationships that your firm or any firm employee has that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists.

(ii) Any family relationship that any employee of your firm has with any County public servant that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists.

(iii) Any other matter that your firm believes may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists.

- b) Please describe any procedures your firm has, or would adopt, to assure the County that a conflict of interest would not exist for your firm in the future.

Intergraph officers are aware of issues that could give rise to a conflict of interest and Intergraph has a dedicated compliance program to help make its employees understand what could cause a conflict of interest. Moreover, Intergraph does not have any officers in Nassau County or other business relations in Nassau County that would give reason to believe a conflict of interest is present.

- A. Include a resume or detailed description of the Proposer's professional qualifications, demonstrating extensive experience in your profession. Any prior similar experiences, and the results of these experiences, must be identified.

Have you previously uploaded the below information under in the Document Vault?

YES ☐ NO ☒

Is the proposer an individual?

YES ☐ NO ☒ Should the proposer be other than an individual, the Proposal MUST include:

- i) Date of formation;

02/12/1969

- ii) Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner. If none, explain.

Intergraph Corporation is a wholly owned subsidiary of Hexagon AB. The annual revenue indicated below corresponds to Hexagon AB.

- iii) Name, address and position of all officers and directors of the company. If none, explain.

Intergraph Corporation is located at 305 Intergraph Way, Madison, Alabama 35758 and its officers and directors are as follows:

Directors: Steven Cost; Mattias Stenberg

Officers: Steven Cost (Chairman of the Board, Chief Executive Officer, President of the Safety, Infrastructure & Geospatial division); Amy Kelly (Acting CFO of Safety, Infrastructure & Geospatial division); Mattias Stenberg (Executive Vice President, President of the ALI division); M. Scott Moore (Executive VP, Treasurer, COO and CFO of the ALI division); Anthony P. Zana (VP, Secretary, General Counsel); Richard L. Morris (Assistant Secretary); Stephany Steinfath (Assistant Secretary); Kristen Sims (Empowered Export Official).

- iv) State of incorporation (if applicable);

DE

- v) The number of employees in the firm;
2180
- vi) Annual revenue of firm;
5628631200
- vii) Summary of relevant accomplishments
See Attached

1 File(s) uploaded: Business History Form Accomplishments 17 A) vii.pdf

- viii) Copies of all state and local licenses and permits.

1 File(s) uploaded: Business History Form License Permits 17 A) viii.pdf

- B. Indicate number of years in business.

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- C. Provide any other information which would be appropriate and helpful in determining the Proposer's capacity and reliability to perform these services.

As an Intergraph customer for over a decade, Intergraph does not believe it has any additional information that is not already known by Nassau County.

- D. Provide names and addresses for no fewer than three references for whom the Proposer has provided similar services or who are qualified to evaluate the Proposer's capability to perform this work.

Company	Washington, D.C- Office of Unified Communications		
Contact Person	Selena MacArthur		
Address	2720 Martin Luther King Jr Avenue		
City	Washington	State/Province/Territory	DC
Country	US		
Telephone	(202) 373-3769		
Fax #			
E-Mail Address	selena.macarthur@dc.gov		

Company	Fairfax County, VA		
Contact Person	Jon Ronan		
Address	4890 Alliance Drive, #1109		
City	Fairfax	State/Province/Territory	VA
Country	US		
Telephone	(571) 350-1730		
Fax #			
E-Mail Address	jon.ronan@fairfaxcounty.gov		

Company	Onondaga County, NY		
Contact Person	Kevin Spraker		
Address	3911 Central Avenue		



Business History Form – *Attachment viii) Copies of all state and local licenses and permits*

As Intergraph Corporation does and is licensed to do business in hundreds of jurisdictions, it is not practical to provide copies of all licenses and permits.



Business History Form *Attachment vii) Summary of relevant accomplishments*

The Hexagon Customer Support Center is an integral part of Hexagon's Extended Warranty and Maintenance programs. The special support requirements for mission-critical Public Safety systems are met by providing the following:

- Toll-free access to Hexagon Customer Support Center resources
- "Always-available" support during Extended Warranty and Maintenance
- Response times monitored by priority
- A central single point-of-contact for all problems
- First level of direct support for Covered Products purchased from Hexagon, including Hexagon software applications, third-party software, operating system software, database management system, development tools, report writers, productivity tools, networking software, and external interface software
- Problem resolution based on priority level

The main priority of the Hexagon Customer Support Center is to meet the needs of the customer when problems occur and to assist in keeping the system in operation and running smoothly. To that end, the Customer Support Center works problems in priority order and the more information that can be provided when a problem is reported, the quicker a solution can be found. For the Customer Support Center to be able to expeditiously resolve problems, it is important that the customer's system administrator attempt to isolate the nature of the problem and determine if it is a hardware or software issue. It is also important that circumstances under which the problem occurs are thoroughly documented before reporting the problem.

When reporting an issue to Hexagon Customer Support, the customer initially determines the priority level of the problem and, following investigation, the priority level being raised or lowered, depending on the findings during problem investigation. Hexagon's Support Center works closely with the customer providing regular updates on cases until the case is resolved and can be closed.

City	Syracuse	State/Province/Territory	NY
Country	US		
Telephone	(315) 435-1446		
Fax #			
E-Mail Address	kevinspraker@ongov.net		

I, Victor S. Vasile , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Victor S. Vasile , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Name of submitting business: Intergraph Corporation

Electronically signed and certified at the date and time indicated by:

Victor S. Vasile VICTOR.VASILE@HEXAGONSI.COM

Regional Divisional Counsel

Title

05/04/2023

Date

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Steven Cost
Date of birth: 09/09/1967
Home address: 1703 Warfield Way SE
City: Huntsville State/Province/Territory: AL Zip/Postal Code: 35801
Country: US
Business Address: 305 Intergraph Way
City: Madison State/Province/Territory: AL Zip/Postal Code: 35758
Country: US
Telephone: 2567302000
Other present address(es):
City: _____ State/Province/Territory: AL Zip/Postal Code: _____
Country: US
Telephone: _____
List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President	<u>07/01/2016</u>	Treasurer	_____
Chairman of Board	<u>07/01/2016</u>	Shareholder	_____
Chief Exec. Officer	<u>07/01/2016</u>	Secretary	_____
Chief Financial Officer	_____	Partner	_____
Vice President	_____		
(Other)			

Type Other
Description President of Safety, Infrastructure & Geospatial division
Start Date 12/01/2013

3. Do you have an equity interest in the business submitting the questionnaire?
YES ☐ NO ☒ If Yes, provide details.

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?

YES ☐ NO ☒ If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?

YES ☒ NO ☐ If Yes, provide details.

Paint Rock Land Company, LLC (Member); JDI Company, LLC (Member); and Intergraph Corporation affiliates.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?

YES ☐ NO ☒ If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:

- a. Been debarred by any government agency from entering into contracts with that agency?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?

YES ☐ NO ☒ If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.

- a. Is there any felony charge pending against you?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- b. Is there any misdemeanor charge pending against you?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- c. Is there any administrative charge pending against you?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- f. In the past 5 years, have you been found in violation of any administrative or statutory charges?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 10 In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 11 In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 12 In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 13 For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

--

I, Steven Cost , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Steven Cost , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Intergraph Corporation

Name of submitting business

Electronically signed and certified at the date and time indicated by:

Steven Cost STEVEN.COST@HEXAGONSI.COM

President, CEO, Chairman of the Board; President of Safety,
Infrastructure & Geospatial division

Title

05/08/2023 04:53:38 pm

Date

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Amy Kelly
Date of birth: 05/13/1977
Home address: 3009 Kincade Way
City: Owens Cross Roads State/Province/Territory: AL Zip/Postal Code: 35763
Country: US
Business Address: 305 Intergraph Way
City: Madison State/Province/Territory: AL Zip/Postal Code: 35758
Country: US
Telephone: 2577302000
Other present address(es):
City: _____ State/Province/Territory: _____ Zip/Postal Code: _____
Country: _____
Telephone: _____

List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President	_____	Treasurer	_____
Chairman of Board	_____	Shareholder	_____
Chief Exec. Officer	_____	Secretary	_____
Chief Financial Officer	_____	Partner	_____
Vice President	_____		
(Other)	_____		

Type Other
Description Accountant (SIG)
Start Date 10/23/2000

Type Other
Description Financial Analyst I (SIG)
Start Date 01/01/2005

Type	Other
Description	Temporary Exempt (SIG)
Start Date	05/21/2005

Type	Other
Description	Manager I-Administration (SIG)
Start Date	05/30/2006

Type	Other
Description	Senior Financial Analyst (SIG)
Start Date	06/30/2007

Type	Other
Description	Financial Analyst III (SIG)
Start Date	06/22/2010

Type	Other
Description	Financial Analyst IV (SIG)
Start Date	06/25/2011

Type	Other
Description	Manager I-Administration (SIG)
Start Date	03/31/2012

Type	Other
Description	Manager II-Administration (SIG)
Start Date	01/02/2016

Type	Other
Description	Administrative Director (SIG)

Start Date 11/05/2016

Type Other

Description Vice President World Wide & Cost Ctr Rpt

Start Date 03/19/2020

Type Other

Description Acting CFO of Safety, Infrastructure & Geospatial division

Start Date 01/17/2023

3. Do you have an equity interest in the business submitting the questionnaire?

YES ☐ NO ☒ If Yes, provide details.

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?

YES ☐ NO ☒ If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?

YES ☒ NO ☐ If Yes, provide details.

171 Mill Creek Crossing LLC

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?

YES ☐ NO ☒ If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:

- a. Been debarred by any government agency from entering into contracts with that agency?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?

YES ☐ NO ☒ If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.

- a. Is there any felony charge pending against you?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- b. Is there any misdemeanor charge pending against you?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- c. Is there any administrative charge pending against you?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- f. In the past 5 years, have you been found in violation of any administrative or statutory charges?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 10 In addition to the information provided in response to the previous questions, in the past 5 years, have you been the

subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 11 In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 12 In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 13 For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

I, Amy Kelly , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Amy Kelly , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Intergraph Corporation

Name of submitting business

Electronically signed and certified at the date and time indicated by:

Amy Kelly AMY.KELLY@HEXAGON.COM

Acting CFO of Safety, Infrastructure & Geospatial division

Title

05/11/2023 02:22:48 pm

Date

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Richard L. Morris
Date of birth: 04/14/1973
Home address: 2015 Alexander Drive
City: Huntsville State/Province/Territory: AL Zip/Postal Code: 35801
Country: US
Business Address: 305 Intergraph Way
City: Madison State/Province/Territory: AL Zip/Postal Code: 35758
Country: US
Telephone: 2567302000
Other present address(es):
City: _____ State/Province/Territory: _____ Zip/Postal Code: _____
Country: _____
Telephone: _____

List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President	_____	Treasurer	_____
Chairman of Board	_____	Shareholder	_____
Chief Exec. Officer	_____	Secretary	<u>03/01/2020</u>
Chief Financial Officer	_____	Partner	_____
Vice President	_____		
(Other)	_____		

Type Other
Description VP of Global Contracts and Sr. Divisional Counsel
Start Date 06/03/2013

Type Other
Description Division General Counsel & VP of Global Contracts
Start Date 02/21/2022

3. Do you have an equity interest in the business submitting the questionnaire?

YES ☐ NO ☒ If Yes, provide details.

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?

YES ☐ NO ☒ If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?

YES ☒ NO ☐ If Yes, provide details.

Secretary of Redstone Federal Credit Union

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?

YES ☐ NO ☒ If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:

a. Been debarred by any government agency from entering into contracts with that agency?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES ☐ NO ☒ If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.

- a. Is there any felony charge pending against you?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- b. Is there any misdemeanor charge pending against you?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- c. Is there any administrative charge pending against you?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 10 In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 11 In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 12 In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 13 For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

I, Richard L. Morris , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Richard L. Morris , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

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Intergraph Corporation

Name of submitting business

Electronically signed and certified at the date and time indicated by:

Richard L. Morris RICHARD.MORRIS@HEXAGONSI.COM

Assistant Secretary

Title

05/08/2023 04:50:04 pm

Date

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

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1. Principal Name: Mattias Stenberg
Date of birth: 04/15/1977
Home address: 17 Ledge View Drive
City: Huntsville State/Province/Territory: AL Zip/Postal Code: 35802
Country: US
Business Address: 305 Intergraph Way
City: Madison State/Province/Territory: AL Zip/Postal Code: 35758
Country: US
Telephone: 2567302000
Other present address(es):
City: _____ State/Province/Territory: _____ Zip/Postal Code: _____
Country: _____
Telephone: _____

List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President	_____	Treasurer	_____
Chairman of Board	_____	Shareholder	_____
Chief Exec. Officer	_____	Secretary	_____
Chief Financial Officer	_____	Partner	_____
Vice President	<u>07/01/2017</u>		
(Other)			

Type Other
Description President of the ALI division
Start Date 01/12/2017

3. Do you have an equity interest in the business submitting the questionnaire?
YES [] NO [X] If Yes, provide details.

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?

YES ☐ NO ☒ If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?

YES ☐ NO ☒ If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?

YES ☐ NO ☒ If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:

- a. Been debarred by any government agency from entering into contracts with that agency?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?

YES ☐ NO ☒ If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.

- a. Is there any felony charge pending against you?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- b. Is there any misdemeanor charge pending against you?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- c. Is there any administrative charge pending against you?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- f. In the past 5 years, have you been found in violation of any administrative or statutory charges?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 10 In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 11 In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 12 In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 13 For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

--

I, Mattias Stenberg , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Mattias Stenberg , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Intergraph Corporation

Name of submitting business

Electronically signed and certified at the date and time indicated by:

Mattias Stenberg MATTIAS.STENBERG@HEXAGON.COM

Executive VP; President of ALI division

Title

05/05/2023 10:58:49 am

Date

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Michael Scott Moore
Date of birth: 06/19/1969
Home address: 39 Ledge View Drive
City: Huntsville State/Province/Territory: AL Zip/Postal Code: 35802
Country: US
Business Address: 305 Intergraph Way
City: Madison State/Province/Territory: AL Zip/Postal Code: 35758
Country: US
Telephone: 2567302000
Other present address(es):
City: _____ State/Province/Territory: _____ Zip/Postal Code: _____
Country: _____
Telephone: _____

List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President	_____	Treasurer	<u>07/01/2016</u>
Chairman of Board	_____	Shareholder	_____
Chief Exec. Officer	_____	Secretary	_____
Chief Financial Officer	_____	Partner	_____
Vice President	<u>07/01/2016</u>		
(Other)			

Type Other
Description CFO and COO of ALI division
Start Date 03/29/2014

3. Do you have an equity interest in the business submitting the questionnaire?
YES [] NO [X] If Yes, provide details.

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?

YES ☐ NO ☒ If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?

YES ☐ NO ☒ If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?

YES ☐ NO ☒ If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:

- a. Been debarred by any government agency from entering into contracts with that agency?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?

YES ☐ NO ☒ If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.

- a. Is there any felony charge pending against you?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- b. Is there any misdemeanor charge pending against you?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- c. Is there any administrative charge pending against you?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- f. In the past 5 years, have you been found in violation of any administrative or statutory charges?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 10 In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 11 In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 12 In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

- 13 For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?

YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.

--

I, Michael Scott Moore , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Michael Scott Moore , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Intergraph Corporation

Name of submitting business

Electronically signed and certified at the date and time indicated by:

Michael Scott Moore SCOTT.MOORE@HEXAGON.COM

CFO and COO of ALI division

Title

05/05/2023 10:48:54 am

Date

COUNTY OF NASSAU

CONSULTANT'S, CONTRACTOR'S AND VENDOR'S DISCLOSURE FORM

1. Name of the Entity: Intergraph Corporation

Address: 305 Intergraph Way

City: Madison State/Province/Territory: AL Zip/Postal Code: 35758

Country: US

2. Entity's Vendor Identification Number: 63-0573222

3. Type of Business: Closely Held Corp (specify) _____

4. List names and addresses of all principals; that is, all individuals serving on the Board of Directors or comparable body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all members and officers of limited liability companies (attach additional sheets if necessary):

1 File(s) uploaded: Consultants Contractors Vendors Disclosure Form Question 4.pdf

5. List names and addresses of all shareholders, members, or partners of the firm. If the shareholder is not an individual, list the individual shareholders/partners/members. If a Publicly held Corporation, include a copy of the 10K in lieu of completing this section.

If none, explain.

Sole Shareholder: Hexagon AB, P.O. Box 3692, SE-103 59, Stockholm, Sweden

6. List all affiliated and related companies and their relationship to the firm entered on line 1. above (if none, enter "None"). Attach a separate disclosure form for each affiliated or subsidiary company that may take part in the performance of this contract. Such disclosure shall be updated to include affiliated or subsidiary companies not previously disclosed that participate in the performance of the contract.

No affiliate or subsidiary will perform this project.

7. List all lobbyists whose services were utilized at any stage in this matter (i.e., pre-bid, bid, post-bid, etc.). If none, enter "None." The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties.



Consultant's, Contractor's and Vendor's Disclosure Form:

Question 4: List names and addresses of all principals; that is, all individuals serving on the Board of Directors or comparable body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all members and officers of limited liability companies:

Steven Cost
305 Intergraph Way
Madison, AL 35758 US
Position: Chairman of the Board, CEO, and President of Hexagon Safety, Infrastructure & Geospatial division

Amy Kelly
305 Intergraph Way
Madison, AL 35758 US
Position: Acting CFO of Hexagon Safety, Infrastructure & Geospatial division

Richard L. Morris
305 Intergraph Way
Madison, AL 35758 US
Position: Assistant Secretary

Stefany Steinfath
305 Intergraph Way
Madison, AL 35758 US
Position: Assistant Secretary

Anthony P. Zana
305 Intergraph Way
Madison, AL 35758 US
Position: VP, Secretary; General Counsel

Mattias Stenberg
305 Intergraph Way
Madison, AL 35758 US
Position: Executive VP; President of Hexagon ALI division

Scott Moore
305 Intergraph Way
Madison, AL 35758 US
Position: Executive VP, Treasurer; COO & CFO of Hexagon ALI division

Kristen Sims
305 Intergraph Way
Madison, AL 35758 US
Position: Empowered Export Official

Are there lobbyists involved in this matter?

YES [] NO [X]

(a) Name, title, business address and telephone number of lobbyist(s):

None

(b) Describe lobbying activity of each lobbyist. See below for a complete description of lobbying activities.

None

(c) List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State):

None

8. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts.

The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.

Electronically signed and certified at the date and time indicated by:

Victor S. Vasile [VICTOR.VASILE@HEXAGONSI.COM]

Dated: 05/04/2023 03:49:10 pm

Title: Regional Divisional Counsel

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions, department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission, with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

Funaro, Timothy G

From: Slogick, Keith <KSlogick@PDCN.ORG>
Sent: Wednesday, July 26, 2023 8:36 AM
To: Funaro, Timothy G
Cc: PLissePD
Subject: FW: RQPD23000277/HEXAGON SOLE SOURCE/JUSTIFICATION
Attachments: 0632_001.pdf

FYI

From: Cleary, Robert <RCleary@nassaucountyny.gov>
Sent: Tuesday, July 25, 2023 11:37 AM
To: Lisse, Patricia Jo <PLisse@PDCN.ORG>
Cc: Colasurdo, Claudia <ccolasurdo@nassaucountyny.gov>; Slogick, Keith <KSlogick@PDCN.ORG>; Murphy, Thomas <TJMurphy@PDCN.ORG>; Field, William (PAB) <WKField@PDCN.ORG>
Subject: RE: RQPD23000277/HEXAGON SOLE SOURCE/JUSTIFICATION

CAUTION: This email originated from outside the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Patti-Jo,

This sole source purchase is approved.

Thank you,

Robert

Robert Cleary
Chief Procurement and Compliance Officer
Nassau County
One West Street
Mineola, NY 11501
(516) 571-1939
rcleary@nassaucountyny.gov

From: Lisse, Patricia Jo <PLisse@PDCN.ORG>
Sent: Wednesday, June 28, 2023 3:47 PM
To: Cleary, Robert <RCleary@nassaucountyny.gov>
Cc: Colasurdo, Claudia <ccolasurdo@nassaucountyny.gov>; Slogick, Keith <KSlogick@PDCN.ORG>; Murphy, Thomas <TJMurphy@PDCN.ORG>; Field, William (PAB) <wkfield@pdcn.org>
Subject: RQPD23000277/HEXAGON SOLE SOURCE/JUSTIFICATION

Mr. Cleary,
Please see attached quote and scope of work, Sole Source and justification letter for the vendor HEXAGON SAFETY AND INFRASTRUCTURE.

Starting September 1st, 2023, the Dept. is REQUIRED to receive requests for emergency Police/EMS response via text.

The cost of this Custom Interface is \$106,417.06.

Thank you for your consideration and quick response to this/we have a short amount of time for approval.

Thank you

Patti-Jo

Patti-Jo Lisse
Acct. Asst. IV
Personnel and Accounting Bureau
Nassau County Police Department
1490 Franklin Avenue
Mineola, NY 11501
516-573-7594
Email: plisse@pdcn.org





William (Bill) H. Starnes
Divisional Counsel
Hexagon Safety, Infrastructure &
Geospatial division
305 Intergraph Way
Madison, AL 35758, USA
T: 1 256.730.3857
william.starnes@hexagon.com
www.hexagon.com

Via Email

June 28, 2023

Ms. Debra Charlene Davis
Bureau Director
Nassau County Police Department
1194 Prospect Avenue
Westbury, NY 11590-2723

Subject: Single Source Certification - Agreements 2023-52313

Dear Ms. Davis:

Currently the Nassau County Police Department has Intergraph software in use. As the manufacturer of the software products, Intergraph Corporation, through its Hexagon Safety, Infrastructure & Geospatial division ("Hexagon") provides unique value in supporting the elements of the software directly provided by Hexagon. In regard to the Custom Interface services to be provided pursuant to the above Quote, the software is directly linked to the unified solution and, therefore, we are the only vendor able to sell and maintain these custom interface services in conjunction with Hexagon's software. No vendor may offer substitute maintenance services for the products currently in use, as Hexagon owns the intellectual property and source code incorporated into the products.

Should you have any questions, or require additional information, please do not hesitate to contact me

Sincerely,

A handwritten signature in cursive script that reads "William H. Starnes".

William H. Starnes
Divisional Counsel
Hexagon Safety, Infrastructure & Geospatial Division



Nassau County



Police Department

BRUCE A. BLAKEMAN
NASSAU COUNTY EXECUTIVE

1490 Franklin Avenue
Mineola, New York 11501
(516) 573-8800

PATRICK J. RYDER
POLICE COMMISSIONER

June 27, 2023

Nassau County Legislature
Theodore Roosevelt Executive and Legislative Building
1550 Franklin Avenue
Mineola, New York 11501

RE: Hexagon (Intergraph) Custom Interface for Text to 911

To Whom It May Concern:

The following is the justification to approve Hexagon (Intergraph) custom interface for Text to 911 spill into the Computer Aided Dispatch system (CAD).

The interface is essential to ensure there are no delays in emergency response due to 911 call takers having to re-enter the textual information received on the 911 Vesta telephone system into the Hexagon CAD system.

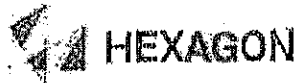
As a result of a lawsuit, Judge Joan M. Azrack, United States District Court Judge for the Eastern District of New York ruled that Nassau County will be non-compliant with the lawsuit settlement if Text to 911 is not implemented before the next hearing scheduled for September 15, 2023.

Hexagon (Intergraph) has been the department's CAD vendor since 2007.

Very truly yours,

A handwritten signature in dark ink, appearing to read "Debra Chaffee-Davis", is written over a circular stamp.

Debra Chaffee-Davis
Bureau Director
Commanding Officer
Police 911 Communications



Customer:	Nassau County Police Department
Quote Number:	2023-62913
Quote Date:	06/19/2023
Expiration Date:	01/26/2024

TO:

Nassau County Police Department
Debra Chaffee Davis
Bureau Director
1490 Franklin Ave

Mineola NY 11501
United States

Tel: 516-573-8609
Fax: (516) 573-7194
Email: dchaffeedavis@pdcn.org

Debbie, Thank you for the opportunity to quote. If you have any questions please feel free to contact us at any time. We would be more than happy to assist you and provide you with additional information. Thank you for your interest in Hexagon Safety & Infrastructure. We look forward to working with you in the future.

Thanks for your business and best regards!

TJ McGee
Account Manager-Eastern Region
Hexagon Safety and Infrastructure
Tel: (256) 730-8369
Cell: (256) 668-4876
Email: tj.mcgee@hexagon.com
www.hexagonsafetyinfrastructure.com

Quotation Issued By
Intergraph Corporation
305 Intergraph Way
Madison, Alabama 35758 USA
Tel: (256) 730-2000



Customer:	Nassau County Police Department
Quote Number:	2023-62313
Quote Date:	06/19/2023
Expiration Date:	01/26/2024

This quotation has been prepared for:
Debra Chaffee Davis
Bureau Director
Nassau County Police Department
1490 Franklin Ave

Mineola NY 11501
United States

Ship To:

Nassau County Police Department
Debra Chaffee Davis
Bureau Director
Change Healthcare
100 Airpark Center Dr E
Nashville Tennessee 37217
United States

Bill To:

Nassau County Police Department
Debra Chaffee Davis
Bureau Director
Change Healthcare
ATTN: Accounts Payable
100 Airpark Center Dr E
Nashville Tennessee 37217
United States

Project Configuration Listing

Part Number	Description	Qty	Ext Net Price
IPSCUSTOM04	Custom Interface for Text-to-911 (3 Spill Into CAD	1	\$73,485.24
SPRSVC9001	Services for Deployment / Configuration / Testing / Issue Resolution / Project Management / and Cutover to Production	1	\$21,412.54
Project Total			\$94,897.78

Maintenance Configuration Listing

Part Number	Description	Qty	Type	# of Mths	Ext Net Price
IPSCUSTOM04	Custom Interface for Text-to-911 (3 Spill Into CAD	1	PRM	12	\$11,519.28
Maintenance Total					\$11,519.28

Quotation Issued By
Intergraph Corporation
305 Intergraph Way
Madison, Alabama 35768 USA
Tel: (256) 730-2000



Customer:	Nassau County Police Department
Quote Number:	2023-52313
Quote Date:	06/19/2023
Expiration Date:	01/26/2024

This Quote is provided pursuant to and governed by those certain terms and conditions set forth at: <https://www.hexagon.com/safety/infrastructure.com/-/media/Legal/Hexagon/US/Sales/USMT062021a.pdf>, which are incorporated herein.

You will be sent a confirmation of purchased maintenance services by the Hexagon Customer Services Administration department.

If maintenance is not purchased at the same time as you purchase products listed in this quotation, you may purchase the maintenance for the products at a later date; however reinstatement or upgrade fees shall apply.

Summary

Project Total	\$84,897.78
Maintenance Total	\$11,519.28
Maintenance Year One:	\$11,519.28

Total Price*	\$106,417.08
--------------	--------------

Quotation Issued By
Intergraph Corporation
305 Intergraph Way
Madison, Alabama 35758 USA
Tel: (256) 730-2000



Customer:	Nassau County Police Department
Quote Number:	2023-52313
Quote Date:	08/19/2023
Expiration Date:	01/26/2024

*Tax Included in this quotation is an estimate only. Final tax billed will reflect the applicable tax rates at time of sale as required by law.

Notes:

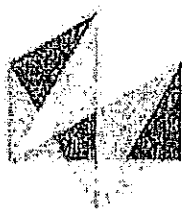
In addition to the Terms and conditions set forth above, this Quote is subject to the attached Statement of Work which more fully sets forth the activities related to the Interface development and Implementation.

Any commercial Off-the-shelf product information Hexagon has shared with its audience during the proposal / contract activities to date, were to provide an understanding of Hexagon's current expected direction, roadmap or vision and is subject to change at any time at Hexagon's sole discretion. Hexagon does not commit to develop the future features, functions and products discussed in this material beyond that which is specifically committed to be provided by Hexagon as part of the intended contract. The audience of this material should not factor any future features, functions or products into its current buying decision since there is no assurance that such future features, functions or products will be developed. When and if these future features, functions or products are developed, they will generally be available for licensing by Hexagon.

To place an order against this quotation, please either fill in the required information below and have an authorized representative of your company sign this quotation, have your company issue a purchase order with the required information below and reference this quotation number, or have your company remit payment via one of the methods described in the billing and payment instructions that follow, making sure to include a reference to this quotation number. Please submit the signed quotation, your purchase order, or payment to the Order Administration desk in accordance with the contact information provided below. This agreement shall only become binding and effective upon the written acceptance by Hexagon or the first delivery of the products/services within this quotation. The terms and conditions of this quotation cannot be superseded, altered, modified, or amended by subsequent Purchase Order or writing received from customer without the express written consent of Hexagon.

Attn: Hexagon Administration
Intergraph Corporation
P. O. Box 240000
Huntsville, AL 35813
Phone: (256) 730-2705
Fax Numbers: 800-239-2972 or 256-730-6089
Email: orders.all.us.slg@hexagon.com

Quotation Issued By
Intergraph Corporation
305 Intergraph Way
Madison, Alabama 35758 USA
Tel: (256) 730-2000



HEXAGON
SAFETY & INFRASTRUCTURE

STATEMENT OF WORK

Custom Interface for Text-to-911 i3 Spill into CAD

Presented to:

Debbie Chaffee
Nassau County, NY

Presented by:

TJ McGee
Hexagon Safety & Infrastructure
305 Intergraph Way
Madison, AL 35758 USA
Phone: 256-730-1324
Email: tj.mcgee@hexagon.com
Fax: 256.730.8369

June 12, 2023



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SOW: Custom Interface for Text-to-911 I3 Spill into CAD
Nassau County, NY

INTRODUCTION

This statement of work ("SOW" or "Statement of Work") together with the Quote, is an Order subject to Terms and Conditions set for at: <https://www.hexagon-safety-infrastructure.com/media/Loga/Hexagon/S/Sales/USMT082021a.pdf> by and between Intergraph Corporation d/b/a Hexagon Safety & Infrastructure ("Hexagon") and Nassau County, NY ("Customer") (collectively, the "Agreement"), defines the software and services required to develop a custom Interface for Text-to-911 I3 Spill into CAD (the "Project"). Functionality not identified in this SOW may be included at additional cost with appropriate revisions to the SOW.

PROJECT DELIVERABLES

The deliverables for this SOW will be as follows:

Software

- ICD – Custom Interface Control Document (Qty 1)
- IPSCUSTOM04 – Custom Interface for Text-to-911 I3 Spill into CAD (Qty 1)

Services

- Hexagon Project Management Services as defined in the General Assumptions Section of this SOW
- Hexagon Implementation Services as defined in the Project Tasks Section of this SOW

GENERAL ASSUMPTIONS

- Pricing and execution of this SOW is contingent and predicated upon the Customer having a valid maintenance agreement in place with Hexagon prior to starting the Project and throughout the Project.
- Hexagon and Customer will review the SOW and determine a mutually agreeable date for the services to be performed. Notwithstanding the foregoing services shall begin within six months of execution of the SOW. Note: The Customer must execute and issue a PO (if applicable) prior to any tentative dates being confirmed.
- Hexagon's pricing and level of effort is predicated upon its understanding of the Customer's current Hexagon software system (the "System") and its configurations are based upon configurations Hexagon made for the Customer during the latter of the initial implementation of the System or the most recent upgrade to the System. Configurations made by the Customer that affect the scope, schedule, or level of effort required to complete the project are not included in the scope of this SOW.
- Hexagon's resource who shall be responsible for the following: (1) maintaining Project communications with the Customer Project Manager; (2) managing the efforts of the Hexagon staff and coordinating Hexagon's activities with the Customer Project Manager; (3) conducting any meetings (if applicable) with the Customer Project Manager; and (4) preparing and submitting Project changes to the Customer Project Manager, as necessary (the "Hexagon Project Manager") will, at a minimum, direct the following activities:
 - Act as single point of contact for the Customer
 - Provide a mutually agreed-upon schedule in Microsoft Project format
 - Order Hexagon software (if applicable)
 - Verify Customer activities related to the Statement of Work have been completed in timely manner
 - Resolve any issues that arise during the Project implementation by coordinating with appropriate Hexagon or Customer resources
 - Process Change Orders (if applicable)
- Hexagon shall have timely access to Customer Project staff. The Customer shall make additional personnel available on a priority basis, as needed, to provide subject matter expertise to complete this Project.
- Customer shall assign a single duly-authorized Customer representative with the authority and/or responsibility to: (1) approve deliverables, changes, invoices, and other official Project documents; (2) allocate and schedule the necessary Customer resources and facilities required to work on and support the Project; (3) communicate with Hexagon's Project Manager; (4) coordinate any necessary efforts performed by Customer's third-party vendors; and (5) provide a single point of contact for coordination with the Hexagon Project Manager (the "Customer Project Manager") to the Project.
- Customer shall have at least one (1) designated person who is responsible for the upkeep, configuration, and reliable operation of computer systems, especially multi-user computers, such as servers (the "System Administrator") available to perform and/or support all Customer Responsibilities and respond to Hexagon requests.
- Customer shall have technical resource(s) and subject matter expert(s) ("SME") available with the skills necessary to perform and/or support all Customer Responsibilities and respond to Hexagon requests during working and non-working hours.
- Customer shall provide Hexagon with access to all data, documents, plans, reports, and analyses related to the scope of work and responsibilities of this Project.

- ④ Customer shall grant Hexagon personnel system administrator level access with unique log-in credentials to all servers, networks, databases, and workstations that will be involved in the Project. Unrestricted system and VPN access via SecureLink is required for Hexagon developers and implementers who will need to have access to multiple infrastructure platforms at the same time. Hexagon personnel will be provided individualized system access credentials by Customer. Customer shall allow Hexagon authorized resources VPN access 24 hours a day, seven days a week for the duration of the Project.
- ④ Customer shall provide Hexagon Project Manager with contact information for a Customer resource to resolve any issues that should arise from Hexagon's access of the Customer's System during working and non-working hours.
- ④ Customer shall schedule and coordinate with third party technical resources with the skills necessary to perform and/or support all Customer Responsibilities, respond to Hexagon requests and support the testing of interfaces, as required.
- ④ Customer is responsible for conforming to Hexagon's supported environments, software requirements and the Hexagon Public Safety System Specifications, which are available upon request or at the Help Desk ("System Specifications").
- ④ Customer is responsible for the purchase, installation, configuration and administration of its network infrastructure. The network infrastructure must meet the defined System Specifications, and the Customer must ensure connectivity between servers and clients.
- ④ Customer is responsible for having current backups of their System.
- ④ Customer is responsible for training users on all functionality.
- ④ All System Documentation and Training documentation, if any, provided by Hexagon under this SOW will be standard COTS documentation and Help Files, and the aforementioned documents will not be customized to Customer's site-specific configuration. All documentation provided by Hexagon will only be provided in electronic format.
- ④ Upon Customer request, Hexagon personnel may undergo a criminal background check consisting of biographical information necessary to initiate an NCIC query and fingerprinting. To the extent the Customer requires Hexagon personnel to undergo the criminal background check, the Customer shall arrange for such criminal background check and fingerprinting and be responsible for any and all costs associated with the criminal background check and fingerprinting. Any remote personnel shall only be required to provide biographical information necessary to initiate a NCIC query and a fingerprint card completed any law enforcement agency.
- ④ Once Hexagon provides the Customer a Project Deliverable Sign-Off Form for a task, Customer shall within five (5) business days either: (i) execute the same indicating the task is complete or accepted, or both, or (ii) identify in writing to Hexagon why Customer considers the task incomplete in light of the task completion criteria outlined herein. Hexagon shall acknowledge its receipt of such list of the identified deficiencies within five (5) business days and Hexagon will use commercially reasonable efforts to address those issues. If Customer fails to provide any written response to Hexagon within five (5) business days of receipt of the Project Deliverable Sign-Off Form, the task shall be deemed accepted.
- ④ After completion of this Project, Hexagon will VPN using SecureLink into the live System only at the Customer's request and will follow the Customer's required VPN access procedures.

CUSTOM INTERFACE ASSUMPTIONS

- Custom Interface functionality assumes Customer is using I/CAD 9.3 version.
- Customer must have required security in place for all connections to the I/CAD systems and Servers.
- All software will be electronically delivered.
- All services will be delivered remotely.
- Customer acknowledges and agrees that an Interface Control Document ("ICD") must be fully approved by Hexagon and Customer before any custom interface development or configuration work can begin, and failure to approve in a timely manner may impact Project schedule and result in additional costs.

PROJECT TASKS

Task Title	
Interface Control Document (ICD) Creation	
Task Overview	
The work performed in this task will be providing services to create an ICD for the Custom Interface for Text-to-911 I3 Spill into CAD Solution.	
Deliverables	
<ul style="list-style-type: none"> Final ICD Project Deliverable Sign Off Form 	
Task Assumptions and prerequisites	
<ul style="list-style-type: none"> The ICD will contain one review cycle. 	
Hexagon Responsibilities	Customer Responsibilities
<ul style="list-style-type: none"> Hexagon will draft the ICD and provide to the Customer for review Hexagon will review Customer feedback to the ICD and incorporate mutually agreed upon updates to the ICD. Hexagon will develop the solution according to the finally approved ICD (the "Final ICD"). 	<ul style="list-style-type: none"> Customer will review draft ICD and provide feedback within ten (10) business days Customer will approve Final ICD within ten (10) business days of receiving the Final ICD from Hexagon
Completion Criteria	
This task is complete upon Hexagon's delivery of all task deliverables listed under this task.	

Task Title	Custom Interface for Text-to-911 i3 Spill into CAD Development	
Task Overview		
<p>The work performed in this task will provide services to develop the CAD Xait Interface to the Tablet Command Solution. The payload would contain position ID and text data which is sufficient to push the data to the correct position. *There will be no change to the current An/All Interface*</p> <p>This will be a new interface and will have server and client components. Server will be responsible for connecting to the text-2-911 provider, processing the payload, and pushing to the Client Addin. The Client Addin would then push the data to the active Calltaker screen.</p>		
Deliverables		
<ul style="list-style-type: none">* Final ICD* IPSCUSTOM04 – Custom Interface for Text-to-911 i3 Spill into CAD Production License (Qty 1)* Project Deliverable Sign Off Form		
Task Assumptions and prerequisites		
<ul style="list-style-type: none">* I/CAD 9.3 Version* Approved ICD		
Hexagon Responsibilities		Customer Responsibilities
<ul style="list-style-type: none">* Hexagon will develop the solution according to the approved ICD (the "Final ICD").		<ul style="list-style-type: none">* Connection to text-to-911 provider
Completion Criteria		
This task is complete upon Hexagon's delivery of all task deliverables listed under this task.		

Task Title	Configuration of Custom Interface for Text-to-911 i3 Spill into CAD – Test Environment	
Task Overview		
The work performed in this task will be providing services to install and configure the custom interface for Text-to-911 i3 Spill into CAD Solution into the Customer's test environment.		
Deliverables		
Project Deliverable Sign Off Form		
Task Assumptions and prerequisites		
<ul style="list-style-type: none">Hexagon has been provided with 24 x 7 VPN connectivity (including a login and password), to all servers, mobile devices and workstations requiring installation/configuration by HexagonCustomer has a working connection to their Text-to-911 provider.		
Hexagon Responsibilities	Customer Responsibilities	
<ul style="list-style-type: none">Remote install of Custom Interface on Customer's existing Test Communications ServerPerform high level testing with the test application installations to:<ul style="list-style-type: none">Ensure that the new server software can communicate with the Customer's Text-to-911 ProviderDemonstrate that the server application installation is complete and validate that the interface works to the Final ICD design	<ul style="list-style-type: none">Must be able to obtain a live connection to the Text Environment for the duration of this ProjectProvide Hexagon with an adequate test environmentParticipate with Hexagon in performing the high-level testing of the custom interface to the Text-to-911 provider.	
Completion Criteria		
This task is complete once Hexagon implements the Custom Interface for Text-to-911 i3 Spill into CAD interface in the Customer's test environment.		

Task Title	
Configuration of Custom Interface for Text-to-911 I3 Spill into CAD – Production Environment	
Task Overview	
The work performed in this task will be providing services to install and configure the custom interface for Text-to-911 I3 Spill into CAD Solution into the Customer's Production environment.	
Deliverables	
<ul style="list-style-type: none"> Project Deliverable Sign Off Form 	
Task Assumptions and prerequisites	
<ul style="list-style-type: none"> Hexagon has been provided with 24 x 7 VPN connectivity (including a login and password), to all servers, mobile devices and workstations requiring installation/configuration by Hexagon Customer has a working connection to their Text-to-911 provider. 	
Hexagon Responsibilities	Customer Responsibilities
<ul style="list-style-type: none"> Remote install of Custom Interface on Customer's existing Production Communications Server Perform high level testing with the test application installations to: <ul style="list-style-type: none"> Ensure that the new server software can communicate with the Customer's Text-to-911 Provider Demonstrate that the server application installation is complete and validate that the interface works to the Final ICD design 	<ul style="list-style-type: none"> Must be able to obtain a live connection to the Production Environment for the duration of this Project Provide Hexagon with a working production environment Participate with Hexagon in performing the high-level testing of the custom interface to the Text-to-911 provider to verify it's working properly.
Completion Criteria	
This task is complete once Hexagon implements the Custom Interface for Text-to-911 I3 Spill into CAD interface in the Customer's production environment.	



ACCEPTANCE CRITERIA

The software and services contemplated by this SOW shall be considered accepted with either written acceptance by the Customer or upon implementation of the Custom Interface for Text-to-911 I3 Spill into CAD in the Customer's production environment, whichever comes first.

Note: If a delay in final acceptance is caused by another vendor or a state agency's ability to provide required deliverables and lasts for more than 30 days after the interface has been delivered by Hexagon, the Customer agrees to provide written acceptance of this Hexagon Interface.

SCHEDULE

Scheduling of Hexagon's services will occur: (1) upon receipt of this executed document, (2) receipt of Customer's purchase order (if applicable), and (3) if Customer has no past due payments to Hexagon. Hexagon and Customer will determine a mutually agreeable schedule for completion of the deliverables as described in this SOW.

CONTRACT PRICE

Pricing for the SOW is in accordance with Hexagon's Quote to which this SOW is attached.

TERMS OF PAYMENT

Payment for this SOW will be due according to the following payment schedule:

Payment Milestone	Payment Percentage
Upon Execution of SOW	50%
Upon acceptance as defined in Section: Acceptance Criteria	50%

Applicable payment terms are set forth in the Agreement.

TERMS & CONDITIONS

The terms and conditions governing this SOW are set forth in the Terms and Conditions located at: <https://www.hexagonsafetyinfrastructure.com/-/media/Local/Hexagon/SI/Sales/USMT062021a.pdf> by and between Nassau County, NY ("Customer") and Intergraph Corporation, doing business through its Hexagon Safety & Infrastructure division ("Hexagon").



APPROVAL SIGNATURES

Signature by all parties listed below constitutes acceptance of and notice to proceed with this SOW, in accordance with this SOW.

This SOW may be executed in one or more counterparts, each of which shall be deemed to be original, and all of which together shall constitute one and the same agreement. A signature delivered by facsimile shall be deemed to be an original signature and shall be effective upon receipt thereof by the other party.

This document is approved by:

Authorized Hexagon Signature	
Name:	Tiffany Taylor, Americas Finance Director Hexagon Safety & Infrastructure
Signature:	Date:

Authorized Customer Signature	
Name:	
Signature:	Date:

REQUISITION

RQPD23000277 26/JUL/2023

VENDOR:
 INTERGRAPH CORPORATION
 PO BOX 6695S DRIVE
 MAIL STOP IW17A2
 HUNTSVILLE AL 35813
 TEL: (256) 730-8510
 FAX: (888) 822-1838

REQUISITIONER:
 PD POLICE DEPARTMENT
 NCPD ADMINISTRATION OFFICE
 1194 PROPECT AVENUE
 WESTBURY NY 11590
 CHAFFEE-DAVIS/CR36/1568/500
 TEL: (516) 573-8600
 FAX: () -

ITEM	DESCRIPTION	QTY	U/M	UNIT COST	TOTAL	
001	208-27 COMMUNICATIONS SOFTWARE FOR MICROCOMPUTERS PART # IPSCUSTOM04 CUSTOM INTERFACE FOR TEXT TO 911 13 SPILL INTO CAD	1.00	EA	73,485.2400	73,485.24	
002	208-66 PROFESSIONAL SOFTWARE FOR MICROCOMPUTERS PART # SPRSVC9001 SERVICES FOR DEPLOYMENT/CONFIGURATION/TESTING ISSUE RESOLUTION/PROJECT MANAGEMENT/AND CUTOVER TO PRODUCTION	1.00	EA	21,412.5400	21,412.54	
003	920-45 COMPUTER SOFTWARE MAINTENANCE/SUPPORT PART # IPSCUSTOM04 CUSTOM INTERFACE FOR TEXT TO 911 13 SPILL INTO CAD MAINTENANCE CONFIGURATION LISTING	1.00	EA	11,519.2800	11,519.28	

ESTIMATED TOTAL: 106,417.06

REQUISITION

RQPD23000277 26/JUL/2023

VENDOR:

INTERGRAPH CORPORATION
PO BOX 6695S DRIVE
MAIL STOP IW17A2
HUNTSVILLE

AL 35813

TEL: (256) 730-8510

FAX: (888) 822-1838

REQUISITIONER:

PD POLICE DEPARTMENT
NCPD ADMINISTRATION OFFICE
1194 PROPECT AVENUE
WESTBURY NY 11590
CHAFFEE-DAVIS/CR36/1568/500
TEL: (516) 573-8600
FAX: () -



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
06/01/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Aon Risk Services Northeast, Inc. Providence RI Office 100 Westminster Street, 10th Floor Providence RI 02903-2393 USA	CONTACT NAME:	
	PHONE (A/C. No. Ext): (866) 283-7122	FAX (A/C. No.): (800) 363-0105
INSURED Intergraph Corporation 305 Intergraph Way Madison AL 35758 USA	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
	INSURER A: Allianz Global Risks US Insurance Co.	35300
	INSURER B: Travelers Property Cas Co of America	25674
	INSURER C: Greenwich Insurance Company	22322
INSURER D: Farmington Casualty Company	41483	
INSURER E:		
INSURER F:		

COVERAGES

CERTIFICATE NUMBER: 570099701970

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			USL02303223	06/01/2023	06/01/2024	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 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
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			HJCAP-162D6025-TIL-23	06/01/2023	06/01/2024	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB DED <input checked="" type="checkbox"/> RETENTION \$25,000 <input type="checkbox"/> CLAIMS-MADE			USL02303323	06/01/2023	06/01/2024	EACH OCCURRENCE \$4,000,000 AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	UB0N2692732313K AOS UB3N0648382313R AR, AZ, FL, GA, MA, MN, NE	06/01/2023	06/01/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE-EA EMPLOYEE \$1,000,000 E.L. DISEASE-POLICY LIMIT \$1,000,000
B					06/01/2023	06/01/2024	
C	Cyber Liability			US00110058E023A E&o/Cyber	06/01/2023	06/01/2024	Aggregate Deductible \$5,000,000 \$683,911

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

NASSAU COUNTY IS ADDITIONAL INSURED UNDER GENERAL LIABILITY COVERAGE AS REQUIRED BY WRITTEN CONTRACT.

CERTIFICATE HOLDER**CANCELLATION**

NASSAU COUNTY POLICE DEPARTMENT ATTN: EDMUND HORACE, DEPUTY INSPECTOR COMMUNICATIONS BUREAU 1490 FRANKLIN AVE MINEOLA NY 11501 USA	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE <i>Aon Risk Services Northeast, Inc.</i>

Holder Identifier :

Certificate No : 570099701970

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