

STATE OF TEXAS                   §  
    §  
 COUNTY OF FORT BEND         §

**TEMPORARY FACILITY USE AGREEMENT BETWEEN  
 Kendleton Church of God  
 AND FORT BEND COUNTY**

THIS AGREEMENT is made and entered into by and between Fort Bend County, (hereinafter "County "), a body corporate and politic under the laws of the State of Texas, and

**Kendleton Church of God**  
 (hereinafter "Owner" ), owner of property located at:  
**619 FM 2919, Kendleton, TX 77451**

**WITNESSETH**

WHEREAS, Greg Abbott, Governor of Texas, has issued a disaster declaration certifying that the novel coronavirus (COVID 19) poses an imminent threat of disaster for all counties in the State of Texas, including Fort Bend County;

WHEREAS, extraordinary measures are being taken by Fort Bend to contain COVID-19, and prevent its spread throughout the County

WHEREAS, Fort Bend has established and continues to establish testing and vaccination sites throughout the County in response to COVID-19 to promote pandemic surveillance and measure the effectiveness of current protective measures to control the increase of infection; and

WHEREAS, Owner has agreed to be a location for which County may use for a testing site, vaccination site or as otherwise may be agreed to assist in efforts to contain and eradicate COVID-19, in Fort Bend County

**NOW, THEREFORE**, in consideration of the premises and the mutual covenants and undertakings herein contained, the Parties agree as follows:

1. Incorporation of Recitals. The recitations stated above are hereby incorporated into this Agreement.
2. Term. Owner will allow the County to use designated space (indoor and/or outdoor as agreed) for communicable disease response at: **619 FM 2919, Kendleton, TX 77451** (hereinafter referred to as "Facility"). The Owner and HHS will schedule access as mutually agreeable between the Parties for up to 90 days from the time this Agreement is signed.
3. Use. County will access and utilize Facility for a testing site, vaccination site or as otherwise may be mutually agreed to by Owner and County's HHS Director.
4. Termination. This Agreement may terminate prior to the initial term if the County determines that the Facility is no longer needed for COVID 19 related purposes.
5. Traffic Control Plan. The County will provide any necessary security and traffic control.

6. **Hours.** Hours of use will be as mutually agreeable between Owner and the County Health and Human Services Director. The County may access the Facility prior to the start of activities and may remain on the site after activities end to perform related necessary tasks before vacating the Facility for the day.
7. **Waiver of Rent.** Considering the importance of conducting these services and the health, safety and welfare benefits to its residents, Owner will waive any rental payment that it may be due for the use of the Facility.
8. **Notice**
  - A. Each party giving any notice or making any request, demand, or other communication (each, a "Notice") pursuant to this Agreement shall do so in writing and shall use one of the following methods of delivery, each of which, for purposes of this Agreement, is a writing: personal delivery, registered or certified mail (in each case, return receipt requested and postage prepaid), or nationally recognized overnight courier (with all fees prepaid).
  - B. Each party giving a Notice shall address the Notice to the receiving party at the address listed below or to another address designated by a party in a Notice pursuant to this Section:

County: Fort Bend County Health and Human Services  
Attn: Director  
4520 Reading Road, Suite A-100  
Rosenberg, Texas 77471

With a copy to: Fort Bend County  
Attn: County Judge  
401 Jackson Street  
Richmond, Texas 77469

Owner: Christina Flores  
City of Kendleton City Secretary  
619 FM 2919  
Kendleton, TX 77451

- C. **Effective Date.** This Agreement is effective on execution of both Parties.

**FORT BEND COUNTY**

KP George  
**KP George, County Judge**  
County Judge KP George

8.10.2021  
**Date**

**ATTEST:**

Laura Richard  
**Laura Richard, County Clerk**



Flores  
**Authorized Agent – Signature**  
**Christina Flores**

**Authorized Agent- Printed Name**  
**City Secretary**  
**Title**  
**08/04/2021**

**Date**

**Reviewed by:**

J Johnson-Minter MD  
**Dr. Jacquelyn Johnson-Minter, MD, MBA, MPH**  
**Director of Health and Human Services**

**APPROVED AS TO LEGAL FORM<sup>1</sup>:**

Michelle L. Turner  
Digitally signed by Turner, Michelle  
DN: dc=us, dc=tx, dc=fort-bend, dc=co,  
dc=fortbend, ou=Fortbend, ou=Departments,  
ou=County Attorney, ou=Users, cn=Turner,  
Michelle  
Date: 2021.08.04 12:52:22 -05'00'

**Michelle L. Turner**  
**General Counsel Division Chief**  
**County Attorney Office**