



OFFICE OF COUNTY PURCHASING AGENT
Fort Bend County, Texas

Term Contract Renewal Form

Solicitation #: Bid 22-040

Title: Term Contract for Electrical Services Contractor

Contracted Vendor: Highlights of Houston. Inc. DBA Highlights Electrical

Mr. Bryan,

Our contract with your company for the above referenced expires March 31, 2023. Contract provisions allow for renewal of this contract if mutually agreeable.

If your company wishes to renew this contract through March 31, 2024 under the same terms and conditions, please complete the information below and return this form along with a Form 1295 by e-mail to brooke.lindemann@fortbendcountytexas.gov. Purchasing will then take the matter before the Commissioner's Court of Fort Bend County for their consideration. Please respond to this email by 5:00 PM, Thursday, January 19th, 2023.

Yes, I agree to renewing our agreement with Fort Bend County under the same terms and conditions.

No, I do not wish to renew our agreement with Fort Bend County.

If Yes, please provide a new Form 1295 along with this renewal form by replying to this email. The Form 1295 must be **new**; previous 1295s are not permitted.

Effective January 1, 2016 all contracts executed by Commissioners Court, regardless of the dollar amount, will require completion of Form 1295 "Certificate of Interested Parties", per the new Government Code Statute §2252.908. All vendors submitting a response to a formal Bid, RFP, SOQ or any contracts, contract amendments, extensions or renewals are required to complete the Form 1295 online through the State of Texas Ethics Commission website. Please visit:

<https://www.ethics.state.tx.us/filinginfo/1295/>.

On-line instructions:

Name of governmental entity is to read: Fort Bend County .

Identification number used by the governmental entity is: B22-040.

Description is to read: Electrical Contractor Services.

After receiving the Form 1295 with a new Certification Number and Date Filed, please print the form and complete box 6, sign, then email the Form 1295 and this signed Term Contract Renewal Form to brooke.lindemann@fortbendcountytexas.gov. If your company is publicly traded you are not required to complete this form.

Clyde Bryan 1/16/23
Signature of Authorized Representative Date

CLYDE BRYAN V.P.
Printed Name and Title of Authorized Representative

Fort Bend County Tabulation
Bid 22-040
Term Contract for Electrical Services Contractor

Term: April 1, 2022 through March 31, 2023

Awarded 2/22/22: Highlights of Houston Inc. dba Highlights Electrical

Vendor	Bid Price per Hour During Normal Working Hours M-F, 8am-5pm	Bid Price per Hour After Normal Working Hours M-F, 8am-5pm and/or Weekends
	Lawson Numbers	
	13029	13030
Highlights of Houston, Inc. dba Highlights Electrical Houston, TX	\$87.00	\$130.50
Tron Electric Katy, TX	\$105.00	\$157.50
Rocha Electrical Services Cypress, TX	Disqualified: Did not provide bid pricing nor references.	

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
CERTIFICATION OF FILING**

Certificate Number:
2023-972283

Date Filed:
01/16/2023

Date Acknowledged:
02/28/2023

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Highlights Electrical
HOUSTON, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Fort Bend County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

B22-040
Electrical Contractor Services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)