

Q-119681**Generated Date:** 04/09/2024**Expiration Date:** 04/30/2024**Opportunity Name:** Fort Bend County - Exagrid Expansion**Opportunity Number:** OP-63088**Sales Out Contract #:** NWN_NATIONAL Choice Partners 21/031KN-43_IT Technology & Related Service**Account Name:** Fort Bend County - HQ @ Richmond, TX**Primary Contact:** Clay Elliot**Contact Phone:** (281) 341-4588**Contact Email:** clay.elliott@fortbendcountytexas.gov

NWN Carousel

Sales Rep: Kerry Cox**Sales Rep Phone:** (281) 596-1113**Sales Rep Email:** kcox@nwncarousel.com**BILL TO**

Fort Bend County - HQ @ Richmond, TX

301 Jackson St

Richmond, TX

77469

SHIP TO

Fort Bend County - HQ @ Richmond, TX

301 Jackson St

Richmond, TX

77469

Product

Exagrid					
#	ITEM	DESCRIPTION	QTY	UNIT PRICE**	EXT. TOTAL
1.	EX84-SEC	DISK CAPACITY RAW 192 TB, SEC PERP USEABLE 168 TB. 84 TB FULL BACKUP	6	\$73,096.75	\$438,580.50
2.	EX-10GBE-TWINAX	EX-10GBE-TWINAX 10GB ENET 2 CPNT PORT SFP+ TWINAX OPTION FOR ALL EXA	6	\$32.00	\$192.00
3.	EX10GBETWINAX1YR MSS	1YR 8X5 EX-10GBE-TWINAX SVCS SVCS	6	\$4.80	\$28.80
4.	FREIGHT CHARGE	Freight Charge	6	\$475.00	\$2,850.00
5.	EX84-SEC-3YR-SUB-5X8	3YR SUB 5X8 6TBS PERP	6	\$31,261.95	\$187,571.70
				Total:	\$629,223.00

Veeam					
#	ITEM	DESCRIPTION	QTY	UNIT PRICE**	EXT. TOTAL
6.	P-ADVPLS-VS-PP000-00	VEEAM DATA PLATFORM ADVANCED ENTERPRISE PLUS. 1 YEAR OF PRODUCTION (24/7) SUPPORT IS INCLUDED. PUBLIC SECTOR.	8	\$3,462.75	\$27,702.00
7.	V-ADVPLS-VS-P02PP-00	2 ADDITIONAL YEARS OF PRODUCTION (24/7) MAINTENANCE PREPAID FOR VEEAM DATA PLATFORM ADVANCED ENTERPRISE PLUS.	8	\$1,968.49	\$15,747.92
				Total:	\$43,449.92

**The Monthly/Unit Price shown above has been rounded to two decimal places for display purposes. As many as eight decimal places may be present in the actual price. The totals for this order were calculated using the actual price, rather than the Monthly/Unit Price displayed above, and are the true and binding totals for this order.

Financial Summary	
ITEM	TOTAL
Quote Sub-Total:	\$672,672.92
One-Time Ext. Total:	\$672,672.92

Billing and Payment Terms	
ITEM	TERM
Billing Terms:	Non-Recurring - Pre-Pay
Payment Terms:	Net 30 Days
Payment Schedule:	100% on Completion

Q-119681

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Accepted and agreed by:

Fort Bend County - HQ @ Richmond, TX

NWN Corporation



Signature

Signature

KP George

Name

Name

County Judge

Title

Title

April 23, 2024

Date

Date

Statement of Confidentiality

This quote has been developed by NWN Carousel and is NWN Carousel's proprietary trade secret and business confidential information. This quote may not be released to another vendor, business partner or contractor without prior written consent from NWN Carousel.

Additional Information

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

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

NWN Corporation
Houston, TX United States

Certificate Number:
2024-1145064

Date Filed:
04/10/2024

Date Acknowledged:
04/23/2024

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.

NWN Carousel
Requisition 235799 Veeam Data platform / Exagrid Data Storage

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)