



155 North Lake Avenue, Suite 900
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everbridge.com



Prepared for:

Thomas Smith
Dodge County Sheriff's Office NE
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United States
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Fax:
Email: emergencymanagement@dodgecountyne.gov

Quotation

Quote #: Q-128145
Date: 6/14/2023
Expires On: 6/30/2023
Confidential

Salesperson: Jake Tallman
Phone: (831) 708-5915
Email: jake.tallman@everbridge.com

Contract Summary Information:

Contract Period:	36 Months
Contract Start Date:	9/4/2023
Contract End Date:	9/3/2026

Contact Summary:

Household Count:	14,286
Employee Count:	

Year 1

QTY	DESCRIPTION	PRICE
1	Mass Notification Base	USD 7,200.20
14,286	Resident Connection - Life Safety - USA	USD 1,285.74
Year 1 TOTAL:		USD 8,485.94

Year 2

QTY	DESCRIPTION	PRICE
1	Mass Notification Base	USD 7,200.20
14,286	Resident Connection - Life Safety - USA	USD 1,285.74
Year 2 TOTAL:		USD 8,485.94

Year 3

QTY	DESCRIPTION	PRICE
1	Mass Notification Base	USD 7,200.20
14,286	Resident Connection - Life Safety - USA	USD 1,285.74
Year 3 TOTAL:		USD 8,485.94

Setup

QTY	DESCRIPTION	PRICE
1	Calculated Set Up Fee	USD 0.00
Setup TOTAL:		USD 0.00

Pricing Summary:

Year One Fees:	USD 8,485.94
One-time Implementation and Setup Fees:	USD 0.00
Professional Services:	USD 0.00
Total Year One Fees Due:	USD 8,485.94

Ongoing Fees:

Year Two Fees:	USD 8,485.94
Year Three Fees:	USD 8,485.94

Terms & Conditions

- This Quote and the Service(s) provided are subject to the Everbridge, Inc. Master Service Agreement current as of the date of Client's signature below. Please visit <https://docs.everbridge.com/cdn/legal/SLG-Master-Services-Agreement-Hyperlink-v9.pdf> to view the Master Service Agreement in its entirety.

2. By signing this Quote you represent that you read, understand and agree to the terms of the Master Service Agreement and are authorized on behalf of the Client to execute the Quote and bind Client to the agreement(s).
3. Messaging Credits listed above can be used for Notifications and expire at the end of each year. Consumption of Messaging Credits in excess of these amounts in any year will incur additional charges.
4. Subject to sales taxes where applicable.
5. Except for currency designation, the supplemental notes below, if any, supplied in this Quote are for informational purposes and not intended to be legally binding or override the language of the Master Service Agreement.

(*Year One Fees are the total of the first year annual subscription fees and any one-time fees, i.e., Professional Services.)

Please, Sign, Date and Return:

Signature:

Date:

Name (Print):

Title:

Please, Sign, Date and Return:

Signature:

Date:

Name (Print):

Title:

Everbridge, Inc.
155 North lake Avenue, Suite 900
Pasadena, CA 91101
(818) 230-9700
THANK YOU FOR YOUR BUSINESS!



CLIENT REGISTRATION FORM

*** Required information**

*** CONTRACTING PARTY / COMPANY NAME:**

*** REQUESTOR / APPROVER OF SERVICE PURCHASE**

Contact Name:

Phone Number:

Email Address:

Alternate Phone:

*** INVOICE DELIVERY / REMITTANCE EMAIL(S):**

*** IS A PURCHASE ORDER REQUIRED FOR PAYMENT?**

Yes _____

No _____

If Yes, P.O. must be submitted at time of purchase. Failure to do so may result in processing delays. Forward to Final.Documents@everbridge.com

(U.S. Clients only)

*** IS YOUR ORGANIZATION EXEMPT FROM PAYING SALES AND USE TAX?**

Yes _____

No _____

If YES, please submit Tax Exemption Certificate to Final.Documents@Everbridge.com

If your organization utilizes Direct Pay, please submit Direct Pay Permit to Final.Documents@Everbridge.com

*** NOTE: A FORM W9 DOES NOT SUPPORT TAX EXEMPT STATUS**

*** FAILURE TO PROVIDE PROOF OF TAX EXEMPT STATUS OR PROOF OF DIRECT PAY PERMIT WILL BE SUBJECT TO SALES TAX, WHERE APPLICABLE**

*** VAT Registration No. (if applicable)**

*** BILL-TO ADDRESS:**

Contact Name:

Address:

City:

State/Province/Region:

Postal/Zip Code:

Country:

*** ACCOUNTS PAYABLE CONTACT:**

Contact Name:

Email Address:

Phone Number:

Fax Number:

Department:

PURCHASER CONTACT INFORMATION:

Contact Name:

Email Address:

Phone Number:

Fax Number:

Department:

NOTES / REMIT INSTRUCTIONS:

VENDOR REGISTRATION FORMS / REQUIREMENTS (EX: W9, ACH/WIRE INSTRUCTIONS):

Forms requiring completion must be emailed to VendorRequests@Everbridge.com