CONTRACT & AGREEMENT ROUTING FORM

CONTRACT#: 25300744 R1 PROJECT #: GT2505 BID/RFP/RFQ#: N/A

Project Name / Contract Description: Hardware and Software License Plate Recognition TxDot Locations

Name of Contractor: Flock Safety

CONTRACT TOTAL VALUE: $ 158,000.00 **Grant Funded** Yes ☒ No ☐

If yes, what is the grant number: GT2505

Debarment Check ☐ Yes ☐ No ☒ N/A
Section 3 Plan Incl. ☐ Yes ☐ No ☒ N/A
Davis Bacon Wages Used ☐ Yes ☐ No ☒ N/A
Buy America Required ☐ Yes ☐ No ☒ N/A
Transparency Report ☐ Yes ☐ No ☒ N/A

☐ **NEW CONTRACT** ☒ **RENEWAL #** 1 ☐ **CHANGE ORDER #** _____ ☐ **OTHER** _____

BUDGETARY AND FINANCIAL INFORMATION (Include number of bids solicited, number of bids received, funding source, budget vs. actual cost, summary tabulation)

Funding Account: 10010301-5122

*(If required)**

CRC Approval Date*: N/A **Council Approval Date*:** N/A **Agenda Item No*:** _____

--Section to be completed by Risk, Purchasing or City Secretary's Office Only—

Insurance Certificates: DDV **Performance Bond:** N/A **Payment Bond:** N/A **Info Tech:** N/A

SIGNATURES RECOMMENDING APPROVAL

Billy Couch — DEPARTMENT DIRECTOR/ADMINISTERING CONTRACT — 9/21/2026 DATE

[signature] — ASST CITY MGR – CFO — 9/21/2026 DATE

David Purnell — LEGAL DEPARTMENT — 9/21/2026 DATE

APPROVED & EXECUTED

Bryan C. Woods — CITY MANAGER — 9/24/2026 DATE

N/A — MAYOR (if applicable) — DATE

N/A — CITY SECRETARY (if applicable) — DATE

9.12.23 UPDATED

CITY OF COLLEGE STATION
Home of Texas A&M University®

Contract #25300744 RENEWAL 1 ACCEPTANCE

By signing herewith, I acknowledge and agree to renew ***Contract 25300744, Hardware and Software License Plate Recognition TxDot Locations,*** in accordance with all terms and conditions previously agreed to and accepted for an amount not to exceed One Hundred Fifty-Eight Thousand and 00/100 Dollars ($158,000.00).

I understand this renewal term will be for the period beginning September 25, 2026, through September 24, 2027. This is the first of two possible renewal options available.

FLOCK SAFETY

By: _____
Printed Name: Dan Haley
Title: Chief Legal Officer
Date: 9/18/2026

CITY OF COLLEGE STATION

By: Bryan C. Woods
City Manager
Date: 9/24/2026

APPROVED:

David Purnell
City Attorney
Date: 9/21/2026

_____
Asst. City Manager/ CFO
Date: 9/21/2026

flock safety

Quote

This document is for informational purposes only. Pricing is subject to change.

Bill To: 1101 Texas Ave College Station, Texas 77842

Ship To: 1101 Texas Ave College Station, Texas 77842

Billing Company Name: TX - College Station PD
Billing Contact Name:
Billing Email Address:
Billing Phone:

Subscription Term: 12 Months
Renewal Term:
Payment Terms: Net 30
Billing Frequency: Annual - First Year at Signing.

Hardware and Software Products

Annual recurring amounts over subscription term

Item	Cost	Quantity	Total
Flock Safety Platform			**$158,000.00**
Flock Safety LPR Products			
Solar Long-Range LPR, fka Solar Falcon LR	Included	10	Included
Flock Safety LPR, fka Falcon	Included	36	Included

Professional Services and One Time Purchases

Item	Cost	Quantity	Total
One Time Fees			

Subtotal Year 1:	$158,000.00
Annual Recurring Subtotal:	$158,000.00
Estimated Tax:	$0.00
Contract Total:	$158,000.00

Taxes shown above are provided as an estimate. Actual taxes are the responsibility of the Customer. This is not an invoice – this document is a non-binding proposal for informational purposes only. Pricing is subject to change.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/23/2026 | 7/24/2026

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 Lockton Companies, LLC DBA Lockton Insurance Brokers, LLC in CA CA license #0F15767 1185 Avenue of the Americas, Ste. 2010 New York NY 10036 (646) 572-7300	**CONTACT NAME:** **PHONE (A/C, No, Ext):** **FAX (A/C, No):** **E-MAIL ADDRESS:**
INSURED 1580302 Flock Group Inc. dba Flock Safety 3284 Northside Pkwy NW Suite 150 Atlanta, GA 30327	**INSURER(S) AFFORDING COVERAGE** / **NAIC #** **INSURER A :** Berkley National Insurance Company — 38911 **INSURER B :** Federal Insurance Company — 20281 **INSURER C :** QBE Specialty Insurance Company — 11515 **INSURER D :** --- SEE ATTACHMENT --- **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** 23792972 **REVISION NUMBER:** XXXXXXX

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE X OCCUR X Ded: $25K/$100K NY GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY ☐ PRO-JECT ☐ LOC ☐ OTHER:	N	N	VGL 9750843 - 10	10/23/2025	10/23/2026	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG $	$ 1,000,000 $ 100,000 $ 10,000 $ 1,000,000 $ 2,000,000 $ 2,000,000 $
B	AUTOMOBILE LIABILITY X ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY	N	N	73655885	10/23/2025	10/23/2026	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) Comp/Coll Ded	$ 2,000,000 $ XXXXXXX $ XXXXXXX $ XXXXXXX $ 10,000
C	☐ UMBRELLA LIAB X OCCUR X EXCESS LIAB ☐ CLAIMS-MADE ☐ DED ☐ RETENTION $	N	N	140010841	10/23/2025	10/23/2026	EACH OCCURRENCE AGGREGATE $	$ 3,000,000 $ 3,000,000 $ XXXXXXX
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N: N / N/A If yes, describe under DESCRIPTION OF OPERATIONS below		N	71845256	10/23/2025	10/23/2026	X PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ 1,000,000 $ 1,000,000 $ 1,000,000
D	See Attached	N	N	See Attached	8/23/2026	8/23/2027	See Attached	

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

Updated ID, NS, 8/12/2026.

CERTIFICATE HOLDER

23792972
Evidence of Insurance

CANCELLATION See Attachment

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

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Cyber/Tech E&O - Primary	
Policy#:	YPB-077863-00
Policy Term:	8/23/2026-8/23/2027
Issuing Co.:	Homesite Insurance Company of Florida
Limit	$5,000,000
Retention?	$250,000

Cyber/Tech E&O - 1st Excess Layer	
Policy#:	XCE-562885K-00
Policy Term:	8/23/2026-8/23/2027
Issuing Co.:	Westfield Specialty Insurance Company
Limit	$5,000,000