EL PASO COUNTY CONTRACT DATA FORM
ATTACH TO FRONT OF ALL CONTRACTS SUBMITTED TO
COMMISSIONERS COURT FOR APPROVAL

ALL INFORMATION BLANKS MUST BE FILLED IN. IF ANY FIELDS ARE NOT
APPLICABLE ENTER N/A.

Date: ___________________ Department: ___________________

Contract No.: KK- ______________ Date Submitted for CA Review: ** ____________

Sponsor/Administrator of Contract: ____________________________

Purpose of Contract/Subject Matter: ____________________________

Funding Source: County: _______ Grant: _______ Other: _______

Other Party(ies) to Contract: __________________________________

Contract Price: ______________ Bid No.: __________ Date Bid Awarded: ____________

Significant Terms/Administrative Milestones:

1. Beginning Date: ______________ Ending Date: ______________

2. Bond Requirements:
   (a) Type of Bond: __________ Bid _______ Performance _______ Payment _______
   (b) Amount: ______________ (c) Copy of Bond Provided: ______________
   (d) Review by Risk Manager: Signature __________________ Date ____________

3. Insurance Requirements:
   (a) Duty to Insure: County _______ Other Party _______ (b) Proof of Ins Provided: ____________
   (c) Type of Ins.: __________________ (d) Amount: ______________
   (e) Review by Risk Manager: Signature __________________ Date ____________

4. Audit Requirements: ______________________________________

5. Notice of Renewal Date: ______________

6. Other:_____________________________________________________

7. Other: ___________________________________________________

8. Account Name and No. for Payment: __________________________

9. Date Contract on Agenda for Approval by Commissioner’s Court: ______________

DEPARTMENT HEAD/ELECTED OFFICIAL ACTION
APPROVED AS TO CONTENT/ACKNOWLEDGEMENT OF DUTY TO ADMINISTER ALL
TERMS AND CONDITIONS: *

The undersigned hereby certifies that they have read the contract and understand
and approve the contract terms except as noted and further certify that the contract conforms to the bid
specifications, if any, and acknowledges that they are responsible for administering all terms and
conditions of the contract.

Department Head/Elected Official ___________________ Date ______________

* Responsibility for Payments/Collections: The sponsor may make arrangements with the County Auditor to make/collect
periodic payments pursuant to the contract. However, it is the responsibility of the sponsor to coordinate such an arrangement
with the Auditor.