

STATE OF VERMONT
CONTRACT ASSIGNMENT

Contract # XXXX

This Contract # XXXX represents an ASSIGNMENT of Contract # XXXX and is executed by assignor XXXX ("XXXX"), accepted by assignee XXXX ("XXXX") and approved by the State of Vermont ("State"). Upon assignment, the parties to Contract # XXXX (f/k/a Contract # XXXX) shall be XXXX and the State.

WHEREAS, XXXX and the State executed Contract # XXXX on XXXX that obligates XXXX to provide certain professional services to the State; and

WHEREAS, pursuant to Attachment C, Section 15 of Contract # XXXX, XXXX is entitled to assign its rights, duties, interests and obligations in Contract # XXXX, provided it obtains the written consent from the State.

NOW, THEREFORE, XXXX hereby assigns its rights, duties, interests and obligations in Contract # XXXX to its affiliated entity (MAY NOT BE RELEVANT IN EVERY ASSIGNMENT), XXXX, whose address is XXXX, pursuant to and in accordance with Attachment C, Section 15 of Contract # XXXX; and XXXX hereby assumes all rights, duties, interests and obligations in Contract # XXXX in all respects.

FURTHERMORE, this Contract # XXXX hereby incorporates and attaches all terms and conditions of Contract # XXXX and all subsequent amendments thereto, and makes them terms and conditions of this Contract # XXXX;

FURTHERMORE, through its incorporation of Contract # XXXX, this Contract # XXXX does not modify, revise or amend any terms or conditions of Contract # XXXX, except as follows:

1. **Maximum Amount.** The maximum amount payable under this contract, wherever such references to the maximum amount appear in said contract shall be changed from \$ _____ to \$ _____. An increase (decrease) amount of \$XXX. **REMOVE IF THIS SECTION NOT APPLICABLE**
2. **Contract Term.** The end date wherever such references appear in said contract and its attachments, is changed from _____ to _____. **REMOVE IF THIS SECTION NOT APPLICABLE**
3. **Attachment A, Scope of Work.** The scope of work is amended as follows: **REMOVE IF THIS SECTION NOT APPLICABLE**
 - Description: ADD \$XXX
 - Description: DECREASE \$XXX
 - Description: NO DOLLAR CHANGE
 - Etc.
4. **Attachment B, Payment Provisions.** The payment provisions of this Contract are amended as follows: **REMOVE IF SECTION NOT APPLICABLE**
 - Description:
5. **Attachment C:** Attachment C: Standard State Contract Provisions for Contracts and Grants dated 03/01/2015 *see attached*, which supersedes all prior versions of Attachment C.

(REMOVE THIS SECTION IF THIS VERSION OF ATTACHMENT "C" IS ALREADY REFLECTED IN CONTRACT)

6. **Taxes Due to the State.** Contractor further certifies under the pains and penalties of perjury that, as of the date this contract amendment is signed, the Contractor is in good standing with respect to, or in full compliance with a plan to pay, any and all taxes due the State of Vermont.

FURTHERMORE, XXXX certifies under the pains and penalties of perjury that, as of the date it affixes its signature below, it is in good standing with respect to, or in full compliance with a plan to pay, any and all taxes due the State of Vermont;

FURTHERMORE, XXXX certifies under the pains and penalties of perjury that, as of the date it affixes its signature below, neither XXXX nor its principals (officers, directors, owners, or partners) are presently debarred, suspended, proposed for debarment, declared ineligible or excluded from participation in federal programs, or programs supported in whole or in part by federal funds. XXXX further certifies under pains and penalties of perjury that, as of the date that this Agreement is signed, XXXX is not presently debarred, suspended, nor named on the State's debarment list at: <http://bgs.vermont.gov/purchasing/debarment>; and

FURTHERMORE, XXXX certifies under the pains and penalties of perjury that, as of the date it affixes its signature below it has secured insurance meeting the minimum coverages identified in Attachment C, Section 7 and any other applicable provision. Before commencing work, XXXX shall provide the State certificates of insurance to show that such minimum coverages are in effect.

IN WITNESS WHEREOF, XXXX has executed this Assignment on the day and year written below to be effective as of the acceptance by XXXX and consent by the State.

XXXX.

BY: _____

NAME: _____

TITLE: _____

DATE: _____

CONSENT TO ASSIGNMENT:

STATE OF VERMONT

BY: _____

NAME: _____

TITLE: _____

DATE: _____

ACCEPTANCE OF ASSIGNMENT:

XXXX

BY: _____

NAME: _____

TITLE: _____

DATE: _____