



## NOTIFEYE™ SOFTWARE SERVICE AGREEMENT

Name as entered in System: \_\_\_\_\_

Date: \_\_\_\_\_

Buyer (Full Name Of Individual (S) Name If Appropriate) <b>Livingston County Schools</b>		TRADE NAME (DBA, IF ANY)		FEDERAL TAX ID (IF REQUIRED) 61-6001359		STATE OF ORGANIZATION <b>Kentucky</b>	
PRIMARY ADDRESS (NUMBER & STREET) <b>127 E Adair Street</b>		CITY <b>Smithland</b>	COUNTY <b>Livingston</b>	STATE <b>KY</b>	ZIP <b>42081</b>	PHONE NUMBER <b>270-928-2111</b>	FAX NUMBER <b>270-928-2112</b>
CUSTOMER LOCATION (IF NOT PRIMARY ADDRESS)		CITY	COUNTY	STATE	ZIP	PURCHASE ORDER #	
INVOICING ADDRESS (Number & Street Or Po Box) <b>PO BOX 219</b>		CITY <b>Smithland</b>	STATE <b>KY</b>	ZIP <b>42081</b>	AP CONTACT <b>Kristy Nelson</b> <small>kristy.nelson@livingston.kyschools.us</small>	EMAIL ADDRESS <small>kristy.nelson@livingston.kyschools.us</small>	
HOSTING INFORMATION							
# of Sensors	# of Gateways	Hosting Fee*		Total Annual Fee*			
<b>6</b>	<b>3</b>	See Table Below		<b>\$300.00</b>			
PAYMENT METHOD <input type="checkbox"/> ACH <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> CHECK							
All payments must include sales tax when mandated by law. Buyer is responsible for any and all collection costs associated with fulfilling this agreement.				System version: <input type="checkbox"/> Legacy <input type="checkbox"/> Gen 3 or higher			

**\*Annual fee is subject to change based on quantity of registered hardware.**

# of Sensors	Annual Fee Per Gateway / Location
1-24	\$100.00
25-49	\$150.00
50-74	\$200.00
75-99	\$225.00
100+	Contact Factory

Acceptance of this NotifEye Software Service Agreement ("Agreement") is expressly conditioned upon Emerson's Terms (<https://climate.emerson.com/en-us/training-support/warranty>), including the Cold Chain – Digital Solutions Terms and Conditions of Service (<https://climate.emerson.com/documents/emerson-s-cold-chain-digital-solutions-unified-terms-of-service-v-93020-en-us-7179678.pdf>), incorporated by this reference. We are proceeding under the assumption that you concur with these terms to govern the order. Any different or additional terms are hereby objected to and superseded by these Terms, unless you have a written, fully-executed agreement with Emerson applicable to this Agreement.

Type of Business  <input type="checkbox"/> Foodservice <input type="checkbox"/> Food Processor <input type="checkbox"/> Industrial and HVAC  <input type="checkbox"/> Other: _____	Buyer: _____  Signature: _____  Name: _____  Title: _____  Date: _____
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Please fax completed form to: 860-349-8994

Cooper-Atkins Corporation  
33 Reeds Gap Road  
Middlefield, CT 06455  
860-349-3473

Payment is required in advance before the renewal is processed.