



COUNTY COMMISSION

BALDWIN COUNTY
312 Courthouse Square, Suite 12
Bay Minette, Alabama 36507
(251) 580-2564
(251) 580-2500 Fax
agary@baldwincountyal.gov
www.baldwincountyal.gov

ANU GARY
Records Manager
MONICA E. TAYLOR
Assistant Records Manager

November 28, 2017

Mr. Michael Molyneux
Manager
Symbol Health Solutions, LLC
3765-A Government Boulevard
Mobile, Alabama 36693

**RE: Symbol Clinics - Bay Minette and Robertsdale Locations –
Usage by Riviera Utilities**

Dear Mr. Molyneux:

Enclosed is a **fully executed copy** of the *Clinic Usage Agreement* approved during the November 7, 2017, Baldwin County Commission meeting between the Commission and Symbol Health Solutions, LLC to grant permission to Riviera Utilities the usage of the Baldwin County Clinics.

If you have any questions or need further assistance, please do not hesitate to contact Andrea Roberson, Personnel Director, at (251) 580-1635.

Sincerely,

ANU GARY, Administration/Records Manager
Baldwin County Commission

AG/met Item BH9

cc: Andrea Roberson

ENCLOSURE

REVOCABLE LICENSE IN CONNECTION WITH
Symbol® CareClinic™ SERVICES AGREEMENT
WITH BALDWIN COUNTY

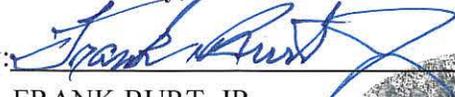
RECEIVED
NOV 28 2017
BY: met

Baldwin County, Alabama, a political subdivision of the State of Alabama, by and through the Baldwin County Commission ("County"), and Symbol Health Solutions[®], L.L.C. ("Symbol"), an Alabama limited liability company, subject to that certain Services Agreement between the County and Symbol ("the County Services Agreement") dated on or about Nov 28 2017, agree as follows:

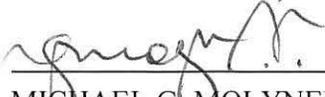
- (1) In response to Symbol's request that the County allow Symbol to provide services to the Utilities Board of the City of Foley, dba Riviera Utilities, at County-owned Facilities where Symbol provides similar services to the County, the County hereby grants Symbol a revocable license to provide such services at such Facilities for the benefit of Riviera Utilities.
- (2) Symbol hereby agrees to indemnify, defend, and hold harmless the County, its officials, representatives, agents, servants, and employees, from and against any and all claims, losses, damages, expenses, attorney fees, demands, suits and causes of action of every kind and character and all other liabilities (collectively, "claims") arising out of or in any way incident to, related to or in connection with (i) breach of any representation, warranty, covenant or agreements set forth in the County Services Agreement and this License, (ii) the provision of services contemplated by the County Services Agreement and this License, (iii) any claim of wrongdoing or action or inaction by a Physician or Medical Staff members or (iv) anything related to the activities at the Clinic except to the extent such Claim arises from the negligent actions or inactions of County which are not within Symbol's reasonable control.
- (3) County may revoke the said license, with or without cause or reason, by giving thirty (30) days written notice to Symbol. The County may, in its discretion, revoke this license without terminating the County Services Agreement between the County and Symbol. The County shall have the right to terminate the County Services Agreement in accordance with the terms of said Agreement. In the event the County elects to terminate the County Services Agreement, this License shall be deemed revoked upon such termination.

Effective this 28th day of November, 2017.

Baldwin County, Alabama

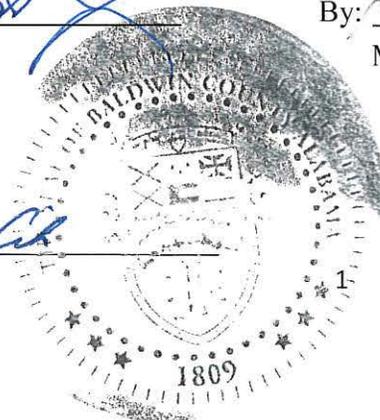
By: 
FRANK BURT, JR.
As Its: Chairman

Symbol Health Solutions, LLC

By: 
MICHAEL G. MOLYNEUX, Manager

Attest:

By: 



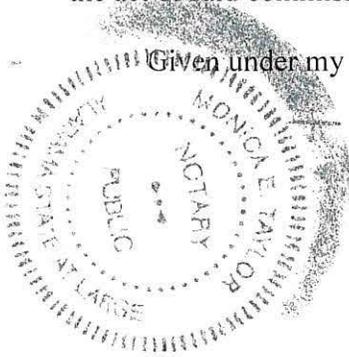
RONALD J. CINK
As Its: County Administrator

STATE OF ALABAMA

COUNTY OF BALDWIN

I, Monica E. Taylor, a notary public in and for said county in said state, hereby certify that Frank Burt, Jr., whose name as Chairman of the Baldwin County Commission, and Ronald J. Cink, whose name as County Administrator of the Baldwin County Commission, a political subdivision of the State of Alabama, are signed to the foregoing instrument and who are known to me, acknowledged before me on this day that, being informed of the contents of such instrument, they, as such officers and with full authority, executed the same voluntarily for and as the act of said commission on the day the same bears date.

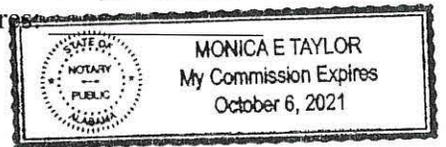
Given under my hand and official seal this 28th day of November, 2017.



Monica E. Taylor

Notary Public, Baldwin County, Alabama

My Commission Expires



STATE OF Alabama

COUNTY OF Mobile

I, Meagan Cain, a notary public in and for said county in said state, hereby certify that Michael G. Molyneux, whose name as Manager of Symbol Health Solutions, LLC, an Alabama limited liability company, is signed to the foregoing instrument and who is known to me, acknowledged before me on this day that, being informed of the contents of such instrument, he, as such officer and with full authority, executed the same voluntarily for and as the act of said limited liability company on the day the same bears date.

Given under my hand and official seal this 21 day of November, 2017.

Meagan Cain

Notary Public, Mobile County, AL

My Commission Expires: 3/17/2020

