

 Quote Number:
 2025-81287

 Quote Date:
 11/04/2025

 Expiration Date:
 12/31/2025

This quotation has been prepared for:

DuPage County IL Gregg Taormina Deputy Director IT 421 North County Farm Road Wheaton IL 60187 United States

End User:

DuPage County IL Gregg Taormina Deputy Director IT 421 North County Farm Road Wheaton Illinois 60187 United States

Bill To:

DuPage County IL Gregg Taormina Deputy Director IT 421 North County Farm Road Wheaton Illinois 60187 United States

This Quotation is issued by:



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Quotation

Project Configuration Listing

USD

Part Number	Description	Qty	Ext Net Price
SPRSVC9001DEV	Development Services to Modify Tablet Command Interface to Add LSI Data / Test / Issue Resolution / Project Management / Deploy to Production / Document	1	\$15,734.30
Project Total			\$15,734.30



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Summary

 USD

 Total Price*:
 \$15,734.30

*Excluding taxes. Final tax billed will reflect the applicable tax rates at time of sale as required by law.

Notes:

This Quote, together with the attached statement of work ("SOW" or "Statement of Work") is an Order subject to that certain Master Agreement dated June 28, 2016 as amended by that certain Restatement Agreement dated March 9, 2022 by and between DuPage County, IL (hereinafter referred to as "Customer") and Intergraph Corporation, through its Hexagon Safety, Infrastructure & Geospatial division (hereinafter referred to as "Hexagon").



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This quote is provided pursuant to separately agreed upon Terms and Conditions which are expressly identified in this Quote; but in absence of such express identification, this Quote is governed by https://legaldocs.hexagon.com/sig/Sales/US-MT06-2021b.pdf.

Any commercial Off-the-shelf product information Hexagon has shared with its audience during the proposal / contract activities to date, were to provide an understanding of Hexagon's current expected direction, roadmap or vision and is subject to change at any time at Hexagon's sole discretion. Hexagon does not commit to develop the future features, functions and products discussed in this material beyond that which is specifically committed to be provided by Hexagon as part of the intended contract. The audience of this material should not factor any future features, functions or products into its current buying decision since there is no assurance that such future features, functions or products will be developed. When and if these future features, functions or products are developed, they will generally be available for licensing by Hexagon.

To place an order against this quotation, prior to the expiration date, please either fill in the required information below and have an authorized representative of your company sign this quotation, have your company issue a purchase order with the required information below and reference this quotation number, or have your company remit payment via one of the methods described in the billing and payment instructions that follow, making sure to include a reference to this quotation number. Please submit the signed quotation, your purchase order, or payment to your Account Manager. This agreement shall only become binding and effective upon the written acceptance by Hexagon or the first delivery of the products/ services within this quotation. The terms and conditions of this quotation cannot be superseded, altered, modified, or amended by subsequent Purchase Order or writing received from customer without the express written consent of Hexagon.



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Signature & Reference

	DuPage County IL
Signature:	
Printed Name:	
Phone:	
Date:	
PO reference(if required for invoicing):	
Tax Exemption ID (if applicable)	

This Quotation is issued by:

Billing & Payment Information

Please check to indicate	payment and billing instructions:
My PURCHASE ORDER (PO) is attached. (Your ord Terms and conditions printed on a customer PO sha attached to this quotation.)	ler will be processed upon written acceptance by Hexagon. Il not supersede the applicable terms and conditions
PO Number: PO Amount:	
I wish to pay by CREDIT CARD. Hexagon will email Please provide the name and email address of the c upon written acceptance by Hexagon and upon auth	you a secure credit card link for you to process payment. redit card holder below. (Your order will be processed orization/approval of your credit card.)
Name as it appears on Credit Card:	
Email address of Cardholder:	
Signature of Cardholder:	
INVOICE ME based on my returning this signed acc processed upon written acceptance by Hexagon and	eptance sheet. No PO will be Issued. (Your order will be I upon credit approval.)
My CHECK payable to <i>Intergraph Corporation</i> has	been sent to the following address
Intergraph Corporation 7104 Solution Center Chicago, IL 60677-7001	
(Your order will be processed upon written acceptar approximately 5 days after receipt by our lockbox.)	nce by Hexagon and after your check clears -
Check Number:	Check Amount
My DOMESTIC WIRE PAYMENT has been wired to	:
ABA Number: Bank Name: Bank of New York Mellon, New Yerk New York New Yerk New	Banken)
My ACH PAYMENT has been sent to:	
Account Number: Company Name: Intergraph Corporation SGI Routing Number: Beneficiary Bank Name: PNC Bank N.A. Address: Pittsburgh, PA 15222 Phone# 1-877-824-5001, Opt 1 and Opt 3 Contact: Lockbox Group, Product Client Serv	

(Your order will be processed upon written acceptance by Hexagon.)