PA Office of Administration

Office for Information Technology

555 Walnut Street, 7th Floor

Harrisburg, PA 17101

To ---------:

 This letter sets out the understanding between the Office of Administration (OA), sublicensee ---------, and contractor --------- related to the use of TomTom products licensed to OA by American Digital Cartography, Inc.

 Under the terms of the license between OA and American Digital Cartography, Inc. (the License), OA may make the TomTom products available to employees of, and contractors for, Commonwealth Agencies, Municipalities, Council of Governments, Municipal Planning Organizations, Public Education Institutions (K-12) only, Local Development Districts, First Responders, all political subdivisions of the Commonwealth and PASDA for their internal use.

 It is understood by this letter, that OA is making the products covered by the License available to contractor ---------, for its use on project --------- for sublicensee --------- solely and specifically for the use on Project --------- for the sublicensee as identified above.

 OA will make these products available to contractor --------- on behalf of sublicensee --------- at no cost for Project ---------. Contractor --------- is provided access to these products solely for use on the identified project for sublicensee --------- and no other, and must uninstall, return and/or stop using all products provided under this agreement as soon as the project has been completed.

 Contractor --------- will abide by the terms of the License, which is attached hereto, and will enter into a contractor sublicense, along with the original sublicensee --------- in a form that is acceptable to OA, with the listed entities that will require any such sublicensee to abide by the terms of the License. The contractor --------- shall hold the OA and sublicensee --------- harmless related to its use of the products.

**Signature of Sublicensee** --------- **Contact Information. Please PRINT or TYPE.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

eMail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Contractor** --------- **Contact Information. Please PRINT or TYPE.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

eMail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of OA**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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