

Solicitation Amendment No. 001

To:	Date:
Prospective Proposers:	August 13, 2010
Project Title:	Project No.:
Records Collection, Storage and Destruction Services	10-17
Description of Solicitation Amendment: The Request for Proposals (RFP) for Records Collection, Storage and Destruction is hereby amended as set forth herein:	
<p><u>Attachment No. 15, Insurance Requirements</u> The Insurance Requirements (Attachment No. 15) contained in the solicitation document is hereby deleted in its entirety and is replaced by the revised Insurance Requirements dated August 13, 2010, and attached hereto and made a part hereof.</p>	
Acknowledgement of Amendment No. by:	Date:
Company Name (Bidder/Offerer):	
Signed by:	
Name (Type or Print):	Title:

ATTACHMENT NO. 15 (Revised)
INSURANCE REQUIREMENTS
Date: August 13, 2010

The following insurance coverage and limits listed herein are the minimum that the Contractor/Vendor is required to carry during performance of the contract for:

Project Title: Records Collection, Storage and Destruction Services

Project Number: 10-17

1. Commercial General Liability for Bodily Injury / Property Damage Limits:

A. Occurrence/Personal Injury/Advertising		
B. Products / Completed Operations	\$1,000,000.00	CSL
C. Annual Aggregate	\$2,000,000.00	CSL
D. Products Aggregate	\$2,000,000.00	CSL
E. Fire, Lightning or Explosion	\$1,000,000.00	CSL
F. Medical Expense	\$5,000.00	Per person

2. Automobile Liability:

Bodily Injury/Property Damage	\$1,000,000.00	CSL
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3. Workers' Compensation

Part A - Statutory		
Part B -	\$1,000,000.00	Each Accident
	\$1,000,000.00	Policy Limits
	\$1,000,000.00	Each Employee

4. Endorsements

The following endorsements and other stated information is required on the original certificate of insurance:

- A. 90-Day Notice of Cancellation;
- B. Houston Community College (HCC) to be named as Additional Insured on all policies except Workers' Compensation;
- C. Waiver of Subrogation on all policies;
- D. The assigned project number and/or purchase order number.

5. Submission of Certificate of Insurance:

The original certificate of insurance, indicating the coverage, limits and endorsements stated herein, shall be furnished to HCC within **fourteen (14)** calendar days of the HCC Board of Trustees approval of the contract award. The Contract will not be awarded until after receipt of the proper certificate of insurance.

Mail the original certificate of insurance to:

ATTN: Wanda Pleasant
Procurement Operations
Houston Community College
PO Box 667517 (MC 1118)
Houston, TX 77266-7517

Note: CSL denotes "Combined Single Limit"