

NAME (Typed): _

OF AUTHORIZED REPRESENTATIVE

THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA SCHOOL BOARD ADMINISTRATION BUILDING

Procurement Management Services 1450 N.E. 2nd Avenue, Room 650 Miami, FL 33132

** TO 10 SE TO 1 SE TO			Direct All Inquiries To Procurement Management Services	
			Buyer's Name: Natalia Delgado	
			PHONE: (305) 995- <u>1621</u>	
			Email: ndelgado@dadeschools.net	
			TDD PHONE: (305) 995-2400	
	ВІС	PART ADDENDUM	AAAAAAA	
			Date: <u>10/6/2015</u>	
			Addendum No. 2	
BID/R	FP No. <u>ITB-14-067-ND</u>	_ BID/RFP TITLE: <u>Distribut</u>	ion of Furniture, Fixtures, Equipment and Materials	
This a	ddendum modifies the cor	nditions of the above-refe	renced BID/RFP as follows:	
1. Ple	ase see the following pages	that modifies the conditions	of this ITB.	
All oth	er terms and conditions with	in the above-referenced ITE	3 remain the same.	
posted The at	d on the Procurement Manag	rement website at http://prod	ove-referenced BID/RFP, are included on the document curement.dadeschools.net ation and requirements constitute an integral part of the	
1		If your bid/proposal has not been submitted, substitute the pages marked REVISED and mail your entire bid/proposal package. REMEMBER TO SIGN THE BIDDER QUALIFICATION FORM.		
			OR	
2	by the time and da THE VENDOR AG	If your bid/proposal has been submitted, sign and return this addendum form with the revised pages by the time and date indicated on the Bidder Qualification Form. BY SIGNING THIS ADDENDUM THE VENDOR AGREES TO THE TERMS AND CONDITIONS CONTAINED IN THE BIDDER QUALIFICATION FORM AND ALL RELATED BID DOCUMENTS.		
l ackn	owledge receipt of Adden	dum Number 2		
	SE NOTE: If your firm has for		I/proposal to another vendor, it is your responsibility to	
		(PLEASE TYPE OR I	PRINT BELOW)	
LEGAL	NAME OF BIDDER:			
MAILIN	NG ADDRESS:			
CITY, S	STATE ZIP CODE:			
			FAX #	
BY:	SIGNATURE (Manual): OF AUTHORIZED REPRESENTATIVE			

TITLE:

MODIFIED CONDITIONS OF THE SOLICITATION

1. Pages 17-19, Section 1.40 Insurance Requirements is changed and replaced with the following:

Prior to commencement of work under the agreement, the Bidder shall obtain and maintain without interruption the insurance as outlined below. The Bidder agrees to furnish a fully completed certificate of insurance naming The School Board of Miami-Dade County, Florida, as additional insured, signed by an authorized representative of the insurer providing such insurance coverages. The insurance coverages and limits shall meet, at a minimum, the following requirements:

A. Workers' Compensation/Employer's Liability Insurance.

Such insurance shall be no more restrictive than that provided by the Standard Workers' Compensation Policy, as filed for use in Florida by the National Board on Compensation Insurance, without restrictive endorsements. The minimum amount of coverage (inclusive of any amount provided by an umbrella or excess policy) shall be:

Part One: "Statutory"

Part Two: \$500,000 Each Accident \$500,000 Disease - Policy Limit \$500,000 Disease - Each Employee

B. General Liability Insurance

Such insurance shall be no more restrictive than that provided by the most recent version of standard Commercial General Liability Form (ISO Form CG 00 01) without any restrictive endorsements. The minimum limits (inclusive of amounts provided by an umbrella or excess policy) shall be:

\$ 1,000,000 General Aggregate

\$ 1,000,000 Products/Completed Operations Aggregate

\$ 1,000,000 Personal and Advertising Injury

\$ 1,000,000 Each Occurrence

Company shall name the Board as an additional insured on a form no more restrictive than the CG 2010.

C. Automobile Liability Insurance

Such insurance shall be no more restrictive than that provided by Section II (Liability Coverage) of the most recent version of standard Business Auto Policy (ISO Form CA 00 01) without any restrictive endorsements, including coverage for liability contractually assumed, and shall cover all owned, non-

owned, and hired autos used in connection with the performance of the Contract. The minimum limits (inclusive of any amounts provided by an umbrella or excess policy) shall be:

\$ 1,000,000 Each Occurrence - Bodily Injury and Property

Compliance with these insurance requirements shall not limit the liability of the Company. Any remedy provided to the Board by the insurance provided by the Board shall be in addition to and not in lieu of any other remedy (including, but not limited to, as an indemnitee of the Company) available to the Board under this Contract or otherwise.

Neither approval nor failure to disapprove insurance furnished by the Company shall relieve the Company from responsibility to provide insurance as required by this Contract.

M-DCPS and its members, officers, employees, and agent shall be named an additional insured on all liability coverages except Workers' Compensation Insurance.