

ADDENDUM #1

To: All Companies Interested in Submitting a Bid **From:** Rebecca Johnson, CPPB, Purchasing Agent

Bid: Ballistic Helmet (RFB #PUR0917-045); Dated: September 20, 2017

Subject: Addendum #1 (1 page)

Date: September 27, 2017

The following questions and/or clarifications were asked relative to the above-listed Request for Bid. This memo is sent for clarification to all companies to whom the bid was sent.

Question: On the style of the helmet, do you want the PASGT, Full Cut, Mid Cut or High Cut "Gunfighter"

style helmets?

Answer: Mid Cut

Question: Why do all of the insurance requirements listed apply to this particular bidding opportunity

because all of the items requested would be drop shipped directly from the manufacturer? Our

employees would never have to be on City property.

Answer: This RFB should require product liability insurance only. The corrected insurance requirements

on page 2 of this Addendum replace the requirements listed in Section 6.0 (pages 10-11) of the

RFB.

All addenda that you receive shall become a part of the contract documents and shall be acknowledged and dated on the bottom of the Signature Page (Attachment A). The deadline for bid submittal is Monday, October 2, 2017 before 3:00 p.m. CDT.

SECTION 6.0 – INSURANCE REQUIREMENTS (revised)

<u>Section I – Basic Insurance Requirements</u>

Vendor, at its own expense, shall procure and maintain the following insurance so as to cover all risk which shall arise directly or indirectly from Vendor's obligations and activities.

Product Liability Insurance with limits of at least \$5,000,000 per occurrence for Bodily Injury and Property Damage.
 This coverage shall protect the public or any person from injury or property damages sustained by reason of the use of the products supplied by the VENDOR.

Section II - Conditions

The Vendor is required to purchase and maintain insurance coverage to protect the Vendor and City of Cedar Rapids per the minimum limits above written. Failure on the part of the Vendor to maintain this insurance in full effect will be treated as a failure on the part of the Vendor to comply with these requirements and be considered sufficient cause to suspend the services, withhold payment(s), and/or be disqualified in the future.

The insurance policies shall be issued by insurers authorized to do business in the State of Iowa and currently having an A.M. Best Rating of "B+" or better. All policies shall be occurrence form. If Professional Liability coverage is written on a claims made policy form, the certificate of insurance must clearly state coverage is claims made and coverage must remain in effect for at least two years after final payment with the Contractor continuing to furnish the CITY certificates of insurance.

The Vendor shall be responsible for deductibles and self-insured retentions in the Vendor's insurance policies.

The Vendor is required to give the City notice of any change in coverage, specifically, any reduction in coverage and cancellation of coverage no less than thirty (30) days prior to the effective date of any non-renewal or cancellation of any policies required by this purchase.

Section III -Approval

A Certificate of Insurance is required evidencing all required insurance coverage as provided above. The Certificate of Insurance is due before the Purchase can be approved. The following format is required:

List Ballistic Helmets, RFB #PUR0917-045, in the Description of Operations section.

The following address must appear in the Certificate Holder section:

City of Cedar Rapids
Finance Department – Purchasing Services Division
101 First Street SE
Cedar Rapids IA 52401

The Producer's contact person's name, phone number and e-mail address is required.

Certificates may be sent by e-mail (<u>r.johnson2@cedar-rapids.org</u>), fax (888-815-3659), mail or delivery to the attention of Rebecca Johnson.