

## **ADDENDUM NO. 2**

**NAME: Building Department Consulting Services (TNH137-2016)**

**DATE: April 13, 2016**

**TO: All Prospective Proposers**

This amendment is being issued to inform the following:

**1) Question:**

The work of this contract is non-physical – there is no construction or movement of materials. Why then would Commercial General Liability / Automobile Liability / Worker's Compensation and Disability be required or provided?

**Answer:** All contractors must provide Workers Compensation and Disability coverage, or an exemption certificate from the State Workers Compensation Board, as we are required by law to collect it. Automobile coverage must only be provided if the firm is going to be using firm-owned vehicles in providing the services. Professional Liability coverage may be substituted for commercial general liability.

The "ADDENDUM NO. 1 RECEIPT ACKNOWLEDGEMENT FORM" on the last page of this Addendum NO. 2 must be signed and dated in the spaces provided and submitted with your Proposal. All Proposers must submit this form with its Proposal regardless of the content contained in each Addendum.

## **ADDENDUM NO.2- RECEIPT ACKNOWLEDGEMENT FORM**

### **REQUEST FOR PROPOSALS FOR – Building Department Consulting Services**

By signing this Acknowledgement and submitting same with its Proposal submission, the undersigned Proposer acknowledges receipt of this Addendum No. 1. Proposer further acknowledges that it has read and reviewed the information contained herein, understands same, and that its questions, if any presented, have been answered satisfactorily. Proposer agrees that it shall incorporate/consider the information contained in this Addendum No. 1 in preparing and providing its proposal price. In addition, this Addendum No.1 Receipt Acknowledgement Form must be signed and dated and attached to the proposal submittal.

Signature: \_\_\_\_\_

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

Proposer Acknowledgement Date: \_\_\_\_\_

Print & Sign Company Principal Name & Title: \_\_\_\_\_

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