



THE CITY OF KEY WEST

Post Office Box 1409 Key West, FL 33041-1409 (305) 809-3700

December 18, 2012

**RE: City of Key West Request for Proposals (RFP) #002-13
Grant Writing Services**

Dear Prospective Respondents to the Request for Proposals (RFP):

The City of Key West is seeking qualified firms to provide Grant Writing Services for the City of Key West. This Request for Proposals (RFP) contains the following information pertaining to the request:

1. One cover sheet which is one (1) page in length;
2. The Request for Proposal is thirteen (13) pages in length and contains important information on deadlines, response contents, as well as the following forms: Anti-Kickback Affidavit one (1) page in length; Public Entity Crimes Certification three (3) pages in length; Equal Benefits For Domestic Partners Affidavit one (1) page in length; Notice of Advertisement (1) page in length; Consultant Ranking Form (1) page in length; and Insurance and Indemnification Requirements eight (8) pages in length and marked as Attachment A.

Please review your response package to ensure it contains all of the named above documents. If not, contact Sue Snider, City of Key West Purchasing Agent, at ssnider@keywestcity.com immediately, to obtain copies of any missing document(s). At the time the proposal is submitted, the successful Responder must show satisfactory documentation of state licenses (if applicable). Please note that the respondent chosen by the City to complete the work required by this Request for Proposal will also be required to obtain and maintain a City of Key West Business Tax Receipt for the duration of the work.

Responses must contain the following complete (and certified, if applicable) documents:

1. A cover letter no more than two (2) pages in length.
 2. Responses to the RFP including an information page, organization chart, company information, personnel, qualifications, specific scope of services proposed and references contained in not more than 20 8 ½" by 11" pages.
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3. Anti-Kickback Affidavit one (1) page in length for each firm involved in the response.
4. Public Entity Crimes Certification three (3) pages in length for each firm involved in the response.
5. Equal Benefits For Domestic Partners Affidavit one (1) page in length

Please submit any questions regarding this RFP in writing or via electronic mail to Sue Snider at ssnider@keywestcity.com. The City of Key West will not consider any questions after January 11, 2013. All answers will be prepared in writing and distributed via electronic mail to all respondents.

Sincerely,

Sue Snider
Purchasing Agent

cc: City Commissioners
Bob Vitas
David Fernandez
Mark Finigan
Shawn Smith



THE CITY OF KEY WEST

Post Office Box 1409 Key West, FL 33041-1409 (305) 809-3700

COVER SHEET

SUBJECT:

CITY OF KEY WEST
REQUEST FOR PROPOSALS #002-13
GRANT WRITING SERVICES

ISSUE DATE:

December 19, 2012

MAIL OR DELIVER RESPONSES TO: CITY CLERK

CITY OF KEY WEST
3126 FLAGLER AVENUE
KEY WEST, FL 33040

RESPONSES DEADLINE DATE:

JANUARY 16, 2013 - NO LATER THAN 3:00 PM

SUE SNIDER
PURCHASING AGENT
CITY OF KEY WEST

**City of Key West Request for Proposals #002-13
CITY OF KEY WEST GRANT WRITING SERVICES**

A. Introduction

The City of Key West requires the services of a qualified individual or firm to identify possible grant opportunities, coordinate with City staff the assimilation and compilation of information and data required to put forth a concise and complete grant application, prepare the grant application, respond to questions and/or requests from the grant making organization and monitor on behalf of the City of Key West the progression of the submitted application until such time the application is awarded or denied. The selected grant writer will be required to abide by all applicable federal, state and local laws and ordinances which may be required in the conduct of performing such services.

B. Response Information

The evaluation of the RFP will be based on a respondent's aptitude, experience, qualifications and approach to tasks as identified herein by the City.

Responses should be submitted to the submittal address by the date and time listed in the submission details. The City will not be responsible for submittals that are delinquent, lost, mismarked, sent to an address other than that given above, or sent by mail or courier service. The City reserves the right, after opening the submittal, to reject any or all responses, or to accept the response(s) that in its sole judgment is (are) in the best interest of the City. Also, the City will not be responsible for responses submitted after the specified date and time.

Submission Details:

1. Submit to:

City Clerk
City of Key West
3126 Flagler Avenue
Key West, Fl 33040

2. Date/Time:

January 16, 2013, 3:00 PM

3. Identification of Responses:

Responses shall be submitted in a two (2) sealed envelopes, one within the other, each clearly marked on the outside: **"Request For Proposals # 002-13- Grant Writing**

Services” the due date, and the respondent’s name.

Project Title: Grant Writing Services

Due Date:

Company:

C. Additional Information

Number of Copies:

Applicants shall submit one response marked “Original”, 10 (ten) copies marked “Copy”, and 10 CD-ROMS; each CD-ROM shall contain one PDF file each of the full response. All contents of a Proposer’s submittal shall remain the property of the City. Responses shall be submitted in two (2) sealed envelopes, one within the other, each clearly marked on the outside: **“Request For Proposals # 002-13– Grant Writing Services”**, the due date, and the respondent’s name.

Response Preparation Costs:

The costs of response preparation for both steps in the process are not reimbursable. Response preparation costs are the applicant’s total responsibility.

Authorized Signature:

The initial response must contain the signature of a duly authorized officer or agent of the proposer’s company empowered with the right to bind the respondent to the RFP. The respondent must provide evidence of the authority of the officer or agent to bind the respondent.

Property of the City:

All responses and related materials provided to the City related to this RFP will become the property of the City of Key West.

License Requirements:

At the time the proposal is submitted, the Responder must show satisfactory documentation of state licenses (if applicable). Please note that the winning respondent will also be required to obtain and maintain a City of Key West Business Tax Receipt for the duration of the work.

Insurance /Indemnification:

Reference Attachment A. – Eight (8) Pages in length.

Financial Information

Each Respondent shall advise as to whether their company has in the past filed for bankruptcy, is currently in bankruptcy, or has bankruptcy action pending.

Litigation

Provide a list of any past, pending or present litigation, arbitration or dispute relating to the services described herein, that you or your firm has been involved in within the last five (5) years. List shall include project name and nature of litigation. Also provide a list of any claims made against your E & O carrier for any services described herein.

Volume of Work

Provide a summary of current workload. State any volume of work that your firm has performed for the City of Key West either as a prime consultant and/or as a sub consultant currently and previously.

References

Provide three (3) references, for which you have provided the similar services over the past five (5) years. Please include references of cities of similar size to Key West.

Scope of Services:

The City of Key West is seeking an experienced professional grant writer(s) to work closely with the City of Key West Mayor, City Commission and with City Departments. Specifically, the following services are intended not to be all inclusive but rather a representation of the breadth and depth of experience and skill of the individual/firm the City of Key West is seeking:

1. Through interviews of the Mayor, Commissioners and responsible department representatives, gather information that will easily allow the individual/firm to grasp the concept of a project or program for which funding is sought as defined by the person sponsoring the project or program or the person responsible for carrying it out.
2. Identify prospective grant sources for the project or program.
3. Acquire and maintain sound knowledge and understanding of the organization, and use that knowledge and understanding to better comprehend all projects and programs for which grants will be sought and to recommend the seeking of grants.

4. Compile, write, and edit grant applications exhibiting strong expository writing skills and a high-level command of grammar and spelling.
5. Review the budget of a project or program for which funding is sought and make recommendations to better present it to grant-making organizations.
6. Keep in contact with grant-making organizations during their review of a submitted grant application in order to be able to supply additional supportive material, if required.
7. Grant administration services are performed internal to the organization. Grant writer must demonstrate experience in successfully and collaboratively working in environments where grant writer and grant administration skills are separate.

The selected individual or firm shall be expected to expeditiously perform the necessary services required under this Request for Proposal and must have the capacity to handle multiple grant applications concurrently. The agreement shall be automatically renewed annually, for up to a maximum of three (3) total years, unless otherwise terminated by either party, in writing, giving 30 days notice.

The City is under no obligation under any resulting agreement to limit the number of grant applications it may direct the Consultant to prepare, submit and monitor.

Response Evaluation:

Responses should provide a straightforward and concise presentation adequate to satisfy the requirements of the RFP. Emphasis should be on completeness and clarity of contents. The selection criteria enumerated in the Consultant Ranking Form will be the principal bases for evaluation.

Response Selection:

All complete and responsive submittals will be evaluated by a City Manager appointed selection team at a publicly noticed meeting held by the end of the business day on February 1, 2013. The City of Key West reserves the right to ask questions, seek clarification of any or all respondents as part of its evaluation. Evaluation and ranking will be accomplished using the attached Consultant Ranking Form. Only the three (3) highest rated Responses as determined by the City Manager appointed selection team will go forward to the City Commission in ranked order. Each short-listed respondent may be required to make an approximately ten minute presentation to the City Commission. Final award will be made by the City Commission, based solely on that response which, in their opinion, is in the best interest of the City of Key West, all factors considered, irrespective of the City Manager appointed selection team ranking.

The City of Key West reserves the right to hire more than one grant writer due to the range of grant interest by the City of Key West or the skill one grant writer may have in a particular grant area(s).

The City contemplates negotiating a lump sum agreement with that consultant selected by the City Commission.

A final contract, including a detailed scope and fee, must be negotiated and then approved by the City Commission. The City reserves the right, without qualification, to exercise discretion and apply its judgment with respect to any responses submitted, as well as to reject all responses.

Response Content:

The City requires the each respondent to submit a concise response clearly addressing all of the requirements outlined in this RFP. Responses must include, at a minimum, two sections. The first section should address qualifications. The second section should address the specific scope of services proposed and costs.

- A. Qualifications. Please provide documentation of the professional qualifications of the key personnel to be employed. Such documentation shall include, but not be limited to:
1. Resumes of academic training and employment in the area of grant writing.
 2. List of federal, state and foundation grants that have been successfully secured over the past five (5) years.
 3. Include three (3) examples of grant applications submitted including pricing methodology used.
- B. Program Approach and Price. Please submit a program for the completion of the scope of services requested above and price, which, at a minimum, shall include the following:
1. From a technical perspective, explain why your organization should be selected for performing the services covered under this Request for Proposals and how you can add value to the goals and objectives of the City. Include examples of your success in performing such services with other entities.
 2. From a logistics perspective, explain how your organization intends to interact and interface with the City in the performance of the Services covered under the Request for Proposals.
 3. Specify address of Firm's designated office where the majority of work on this project will be performed. Indicate percentage total over-all of the Services to be performed by the Firm's office specified above. Specify address of Firm's other office(s) where any part of the work for these Services will be performed if applicable;

4. Proposed price for the scope of services requested above, to include a detail of proposed reimbursable expenses which may be incurred in the conduct of providing said services;

5. Any other material as may be helpful to establish that the respondent has the necessary facilities, ability, and financial resources to furnish the required services in a satisfactory manner.

ANTI-KICKBACK AFFIDAVIT

STATE OF FLORIDA

SS:

COUNTY OF MONROE

I the undersigned hereby duly sworn, depose and say that no portion of the sum herein response will be paid to any employee of the City of Key West as a commission, kickback, reward or gift, directly or indirectly by me or any member of my firm or by an officer of the corporation.

BY: _____

sworn and prescribed before me this _____ day of _____, 2011

NOTARY PUBLIC, State of Florida

My commission expires:

**SWORN STATEMENT PURSUANT TO SECTION 287.133(3)(A)
FLORIDA STATUTES, ON PUBLIC ENTITY CRIMES**

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS,

1. This sworn statement is submitted to
by

(print individual's name and title)

for

(print name of entity submitting sworn statement)

whose business address is

and (if applicable) its Federal Employer Identification Number (FEIN) is

_____ (if the entity has no FEIN, include the Social Security
Number of the individual signing this sworn statement):

2. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or of the United States, including, but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
3. I understand that "conviction" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 01, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
4. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
1. A predecessor or successor of a person convicted of a public entity crime: or
 2. An entity under the control of any natural person who is active in

the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members and agent who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment of income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

5. I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statute means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.
6. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement (indicate which statement applies).

Neither the entity submitting this sworn statement, or any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July, 1989.

_____ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 01, 1989.

_____ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 01, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. (attach a copy of the final order)

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH ONE (1) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES, FOR THE CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

(SIGNATURE)

(DATE)

STATE OF _____

COUNTY OF _____

PERSONALLY APPEARED BEFORE ME, the undersigned authority
_____ who, after first being sworn by me,
(name of individual)
affixed his/her signature in the space provided above on this
_____ day of _____, 2011

NOTARY PUBLIC

My commission expires:

EQUAL BENEFITS FOR DOMESTIC PARTNERS AFFIDAVIT

STATE OF FLORIDA)

: SS

COUNTY OF _____)

I, the undersigned hereby duly sworn, depose and say that the firm of _____ provides benefits to domestic partners of its employees on the same basis as it provides benefits to employees' spouses per City of Key West Ordinance Sec. 2-799.

By: _____

Sworn and subscribed before me this

_____ day of _____, 20 ____.

NOTARY PUBLIC, State of Florida at Large

My Commission Expires: _____

NOTICE OF ADVERTISEMENT – REQUEST FOR PROPOSALS

NOTICE is hereby given to prospective proposers that responses will be received by the CITY of KEY WEST, FLORIDA by the office of the City Clerk, 3126 Flagler Avenue, Key West, Florida 33040 until 3:00 p.m. January 16, 2013 for the “Request For Proposals #002-13 – Grant Writing Services” in the Office of the City Clerk . Any responses received after the time announced will not be considered.

Scope of Services and Response Documents may be obtained from DemandStar by Onvia at www.demandstar.com/supplier or call toll-free at 1-800-711-1712. One (1) original and ten (10) copies of the responses are to be enclosed in two (2) sealed envelopes, one within the other, each clearly marked on the outside: **“Request For Proposals # 002-13– Grant Writing Services”** the due date, and the respondent’s name, addressed and delivered to:

CITY CLERK, CITY OF KEY WEST, FLORIDA
CITY HALL, 525 ANGELA STREET
KEY WEST, FLORIDA 33040

At the time of the proposal, the successful Responder must show satisfactory documentation of state licenses (if applicable).

Any permit and/or license requirement and subsequent costs are located within the response documents. The successful Responder must also be able to satisfy the City Attorney as to such insurance coverage, and legal requirements as may be demanded by the response in question. The City may reject responses: (1) for budgetary reasons, (2) if the responder misstates or conceals a material fact in its response, (3) if the response does not strictly conform to the law or is non-responsive to the response requirements, (4) if the response is conditional, or (5) if a change of circumstances occurs making the purpose of the response unnecessary, (6) if such rejection is in the best interest of the City. The City may also waive any minor formalities or irregularities in any response.

Sue Snider, Purchasing Agent

CITY OF KEY WEST CONSULTANT RANKING FORM

Project Name: Grant Writing Services

Project Number: RFP #002-13

Firm _____

Date _____

SELECTION CRITERIA	POINTS ALLOWED	POINTS EARNED
Professional Qualifications of Key Personnel	25	
Program Approach	20	
Familiarity With Local Area	10	
Cost Proposal and Pricing Methodology	35	
Sub-Total Points	90	

References	10	
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Total Points	100	
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ATTACHMENT A.

INSURANCE

INDIVIDUAL / FIRM is to secure, pay for, and file with the City of Key West, prior to commencing any work under the Contract, all certificates for workers' compensation, public liability, and property damage liability insurance, and such other insurance coverages as may be required by specifications and addenda thereto, in at least the following minimum amounts with specification amounts to prevail if greater than minimum amounts indicated. Notwithstanding any other provision of the Contract, the INDIVIDUAL/FIRM shall provide the minimum limits of liability insurance coverage as follows:

Auto Liability	\$1,000,000	Combined Single Limit
General Liability	\$2,000,000	Aggregate (Per Project)
	\$2,000,000	Products Aggregate
	\$1,000,000	Any One Occurrence
	\$1,000,000	Personal Injury
	\$ 300,000	Fire Damage/Legal
Professional Liability	\$1,000,000	Per Claim / Aggregate
Additional Umbrella Liability	\$ 2,000,000	Occurrence / Aggregate

INDIVIDUAL / FIRM shall furnish an original Certificate of Insurance indicating, and such policy providing coverage to, City of Key West named as an additional insured on all policies-excepting Professional Liability-on a PRIMARY and NON CONTRIBUTORY basis utilizing an ISO standard endorsement at least as broad as CG 2010 (11185) or its equivalent, (combination of CG 20 10 07 04 and CG 20 37 07 04, providing coverage for completed operations, is acceptable) including a waiver of subrogation clause in favor of City of Key West on all policies. INDIVIDUAL/FIRM will maintain the Professional Liability, General Liability, and Umbrella Liability insurance coverages summarized above with coverage continuing in full force including the additional insured endorsement until at least 3 years beyond completion and delivery of the work contracted herein.

Notwithstanding any other provision of the Contract, the INDIVIDUAL / FIRM shall maintain complete workers' compensation coverage for each and every employee, principal, officer, representative, or agent of the INDIVIDUAL/FIRM who is performing any labor, services, or material under the Contract. Further, INDIVIDUAL / FIRM shall additionally maintain the following minimum limits of coverage:

Bodily Injury Each Accident	\$1,000,000
Bodily Injury by Disease Each Employee	\$1,000,000
Bodily Injury by Disease Policy Limit	\$1,000,000

If the work is being done on or near a navigable waterway, INDIVIDUAL / FIRM's workers compensation policy shall be endorsed to provide USL&H Act (WC 00 01 06 A) and Jones Act (WC 0002 01 A) coverage if specified by the City of Key West. INDIVIDUAL / FIRM shall provide the City of Key West with a Certificate of Insurance verifying compliance with the workman's compensation coverage as set forth herein and shall provide as often as required by the City of Key West such certification which shall also show the insurance company, policy number, effective and expiration date, and the limits of workman's compensation coverage under each policy.

INDIVIDUAL / FIRM's insurance policies shall be endorsed to give 30 days written notice to the City of Key West in the event of cancellation or material change, using form CG 02 24, or its equivalent.

Certificates of Insurance submitted to the City of Key West will not be accepted without copies of the endorsements being requested. This includes additional insured endorsements, cancellation/material change notice endorsements, and waivers of subrogation. Copies of USL&H Act and Jones Act endorsements will also be required if necessary. PLEASE ADVISE YOUR INSURANCE AGENT ACCORDINGLY.

INDIVIDUAL/FIRM will comply with any and all safety regulations required by any agency or regulatory body including but not limited to OSHA. INDIVIDUAL/FIRM will notify City of Key West immediately by telephone at (305) 809-3811 any accident or injury to anyone that occurs on the jobsite and is related to any of the work being performed by the INDIVIDUAL/FIRM.

Indemnification

To the fullest extent permitted by law, the INDIVIDUAL/FIRM expressly agrees to indemnify and hold harmless the City of Key West, their officers, directors, agents, and employees (herein called the "indemnitees") from liabilities, damages, losses and costs, including, but not limited to, reasonable attorney's fees and court costs, such legal expenses to include costs incurred in establishing the indemnification and other rights agreed to in this Paragraph, to persons or property, to the extent caused by the negligence, recklessness, or intentional wrongful misconduct of the INDIVIDUAL/FIRM, its Subcontractors or persons employed or utilized by them in the performance of the Contract. Claims by indemnitees for indemnification shall be limited to the amount of INDIVIDUAL/FIRM's insurance or \$1 million per occurrence, whichever is greater. The parties acknowledge that the amount of the indemnity required hereunder bears a reasonable commercial relationship to the Contract and it is part of the project specifications or the bid documents, if any.

The indemnification obligations under the Contract shall not be restricted in any way by any limitation on the amount or type of damages, compensation, or benefits payable by or for the INDIVIDUAL/FIRM under workers' compensation acts, disability benefits acts, or other employee benefits acts, and shall extend to and include any actions brought by or in the name of any employee of the INDIVIDUAL/FIRM or of any third party to whom INDIVIDUAL/FIRM may subcontract a part or all of the Work. This indemnification shall continue beyond the date of completion of the work.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED- OWNERS, LESSEES OR CONTRACTORS -SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):	Location(s) Of Covered Operations
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Section II -Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY
CG 20 37 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED-OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):	Location And Description Of Completed Operations
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

EARLIER NOTICE OF CANCELLATION PROVIDED BY US

Number of Days Notice ~~30~~ _____

For any statutorily permitted reason other than nonpayment of premium, the number of days required for notice of cancellation is increased to the number of days shown in the Schedule above.

If this policy is cancelled by us we will send the Named Insured and any party listed in the following schedule notice of cancellation based on the number of days notice shown above.

Schedule

Name of Person or Organization

Mailing Address

POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY
CG 24040509

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Person Or Organization:

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph 8. Transfer Of Rights Of Recovery Against Others To Us of Section IV – Conditions:

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement
Insured

Effective Policy No.

Endorsement No.
Premium

Insurance Company

Countersigned by _____

we 000313
(Ed. 4-84)