

CITY OF HIALEAH
INSURANCE CHECK LIST
 Construction Manager at Risk for City of Hialeah
 Educational Academy Phase 4 Expansion
 2024-25-039

INSURANCE	LIMITS
<input checked="" type="checkbox"/> 1. COMMERCIAL GENERAL LIABILITY PREMISES OPERATIONS INCLUDED; PRODUCTS AND COMPLETED OPERATIONS INCLUDED; INDEPENDENT CONTRACTORS (O.C.P.) INCLUDED; ELEVATORS INCLUDED; SUPERVISION EXCLUSION DELETED; PERSONAL INJURY LIABILITY INCL	\$2,000,000 PER OCCURRENCE/ \$4,000,000 GENERAL AGGREGATE FOR BODILY INJURY AND PROPERTY DAMAGE COMBINED EACH OCCURENCE
<input checked="" type="checkbox"/> 2. AUTOMOBILE LIABILITY OWNED, NON-OWNED/ HIRED INCLUDED	\$1,000,000 SINGLE LIMIT FOR BODILY INJURY & PROPERTY DAMAGE COMBINED EACH OCCURRENCE
<input checked="" type="checkbox"/> 3. UMBRELLA LIABILITY	\$2,000,000 EXCESS OF ALL PRIMARY COVERAGE
<input checked="" type="checkbox"/> 4. WORKERS' COMPENSATION AND EMPLOYEE'S LIABILITY POLICY ISSUED IN NAME OF VENDOR	STATUTORY LIMITS OF THE STATE OF FLORIDA
<input checked="" type="checkbox"/> 5. THE CITY MUST BE NAMED BY ENDORSEMENT AS ADDITIONAL INSURED ON THE INSURANCE POLICY. THE FOLLOWING MUST ALSO BE STATED ON THE CERTIFICATE. "THESE COVERAGES ARE PRIMARY AND NON-CONTRIBUTORY TO ALL OTHER COVERAGES THE CITY POSSESSES FOR THIS CONTRACT ONLY." AND WAIVER OF SUBROGATION ON THE POLICY	
<input checked="" type="checkbox"/> 6. A.M. BEST RATING FOR EACH INSURER	A- FRS RATING OR BETTER AND X FSC CLASS OR BETTER
<input checked="" type="checkbox"/> 7. THIRTY (30) DAYS CANCELLATION NOTICE REQUIRED	
<input checked="" type="checkbox"/> 8. ERRORS & OMISSIONS/PROFESSIONAL LIABILITY	\$1,000,000 EACH CLAIM
<input type="checkbox"/> 9. LIQUOR LEGAL LIABILITY	\$1,000,000 EACH OCCURRENCE
<input type="checkbox"/> 10. XCU PROPERTY DAMAGE EXCLUSION DELETED AND THIS COVERAGE WILL PROVIDED	
<input type="checkbox"/> 11. CYBER LIABILITY	\$5,000,000 EACH CLAIM \$250,000 SOCIAL ENGINEERING

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___ 12. INFORMATION TECHNOLOGY ERRORS AND OMISSIONS INCLUDING CYBER LIABILITY AND PRIVACY PROTECTION	\$1,000,000 EACH CLAIM
___ 13. POLLUTION LIABILITY	\$1,000,000 EACH CLAIM
X ___ 14. SUBCONTRACTOR PROVIDER INSURANCE COVERAGE (IF APPLICABLE)	\$1,000,000 GENERAL LIABILITY WORKERS COMPENSATION \$1,000,000 AUTOMOBILE LIABILITY
___ 15. GARAGE LIABILITY	\$1,000,000 SINGLE LIMIT FOR BODILY INJURY AND PROPERTY DAMAGE COMBINED EACH OCCURRENCE
___ 16. GARAGEKEEPER'S LEGAL LIABILITY	\$100,000 EACH OCCURRENCE
___ 17. BUILDERS RISK	FULL CONSTRUCTION COSTS OF THE PROJECT
___ 18. BUSINESS PERSONAL PROPERTY COV.	LIMITS EQUALING REPLACEMENT COST OF VENDOR'S PROPERTY
___ 19. SPOILAGE COVERAGE	LIMITS EQUALING REPLACEMENT COST OF VENDOR'S PROPERTY
___ 20. LOSS OF INCOME COVERAGE.	LIMITS ADEQUATE TO COVER LOSS OF INCOME AND EXTRA EXPENSE FOR 12 MONTHS
___ 21. CRIME COVERAGE	\$5,000,000 EACH CLAIM EMPLOYEE DISHONESTY INCLUDING FORGERY, COMPUTER FRAUD AND WIRE TRANSFER FRAUD. SOCIAL ENGINEERING
___ 22. ATHLETIC FIELD USAGE COMMERCIAL GENERAL LIABILITY PREMISES OPERATIONS INCL PRODUCTS AND COMPLETED OPERATIONS INCL PERSONAL INJURY LIABILITY INCL ATHLETIC PARTICIPANT LIABILITY INCL ABUSE AND MOLESTATION COVERAGE INCL	\$1,000,000 SINGLE LIMIT FOR BODILY INJURY AND PROPERTY DAMAGE COMBINED EACH OCCURRENCE

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____ 23. TEACHERS PROFESSIONAL LIABILITY	\$1,000,000 EACH CLAIM
____ 24. TRANSPORTATION INSURANCE	\$150,000
____ 25. MEDIA LIABILITY INSURANCE	\$1,000,000

WHEN USING THE "ACCORD" FORM OF INSURANCE CERTIFICATE, PLEASE NOTE THAT IN THE "CERTIFICATE HOLDER" BOX, THE FOLLOWING MUST BE SHOWN:

CITY OF HIALEAH, A MUNICIPAL CORPORATION, 501 PALM AVENUE, HIALEAH, FL 33010

BIDDER AND INSURANCE AGENT STATEMENT:

We understand the Insurance Requirements of this Solicitation and we recognize that evidence of insurability will be required within five (5) days after intend to award is issued.

Bidder's Name Insurance
Agency

Signature of Bidder's
Representative

Signature of Bidder's Agent

Agent's Errors and Omissions Policy:

Signature of Florida Resident
Agent

Policy Company; Expiration Date;
Amount of Coverage; Policy
Number

Name and Location of Agency