



# St. Johns River

## Water Management District

Ann B. Shortelle, Ph.D., Executive Director

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525 Community College Parkway S.E. • Palm Bay, FL 32909 • 321-984-4940  
On the internet at [www.sjrwmd.com](http://www.sjrwmd.com).

DATE: February 3, 2021  
TO: Prospective Respondents  
FROM: Amy Lucey, Contracts Administrator  
SUBJECT: Addendum #1 to Quote Request # 36505, S-157 A Frame Fabrication

As a result of inquiries, the following clarifications/changes are provided for your information. Please make all appropriate changes to your quote documents. Note: changes are reflected with original language shown with strike-through and new language is underlined.

- Q1: The RFQ talks about S157 A-Frame Fabrication, but the *Title of the drawing* attached above as reference, has this piece titled as a “NEEDLE BEAM FRAME”.  
Is S157 A-Frame Fabrication indeed the piece shown in the drawing, that’s what you want fabricated?
- A1: The Needle Beam Frame and the A-Frame is the same piece shown in the drawing.
- Q2: I am going through the quote request for the A-Frame Fabrication (36505) and there are two documents regarding insurance. There's an exhibit 4 and an attachment 2. I would like to verify that we are to follow exhibit 4, as stated in the table of contents from page 5 of the quote request.
- A2: Please use Exhibit 4 and delete pages 16 & 17.

Corrections:  
Please delete pages 16 & 17 in entirety.

**NOTE:** The Quote Request Due Date **remains** 3:00 p.m., **Thursday, February 18, 2021**

Please acknowledge receipt of this Addendum on the **Quote Cost Schedule** FORM provided in the quote package.

If you have any questions, please e-mail me at [alucey@sjrwmd.com](mailto:alucey@sjrwmd.com).

ATTACHMENT 2 — INSURANCE

~~Supplier shall acquire and maintain until completion of the Work the insurance coverage listed below, which constitutes primary coverage. Consultant shall not commence the Work until the District receives and approves Certificates of Insurance documenting required coverage. Consultant's General Liability policy shall include Endorsement CG 20 10 04 13, or equivalent, naming the St. Johns River Water Management District (the "District") as Additional Insured. All required policies shall include: (1) endorsement that waives any right of subrogation (Endorsement 24 04 05 09, or equivalent) against the District for any policy of insurance provided under this requirement or under any state or federal worker's compensation or employer's liability act; (2) endorsement to give the District no less than 30 days' notice in the event of cancellation or material change. Certificates of Insurance must be accompanied by copies of the requested endorsements.~~

~~Any deductibles or self-insured retentions above \$100,000 must be declared to and approved by the District. Approval will not be unreasonably withheld. Consultant is responsible for any deductible or self-insured retention. Insurance must be placed with insurers having an A.M. Best rating of A-V or greater. District receipt of insurance certificates providing less than the required coverage does not waive these insurance requirements.~~

- ~~1. — **Workers' Compensation Insurance.** Workers' compensation and employer's liability coverage, including maritime workers compensation, if applicable, in not less than the minimum limits required by Florida law. If Contractor claims an exemption from workers' compensation coverage, Contractor must provide a copy of the Certificate of Exemption from the Florida Division of Workers' Compensation for all officers or members of an LLC claiming exemption who will be participating in the Work. In addition, Contractor must provide a completed District "Affidavit (Non-Construction)" for non-construction contracts. Contractor is solely responsible for compliance with any Federal workers' compensation laws such as Jones Act and USL&H Act, including any benefits available to any workers performing work on this project.~~
- ~~2. — **General Liability.** Commercial General Liability Insurance on an "Occurrence Basis," with limits of liability for each occurrence of not less than \$1,000,000 for personal injury, bodily injury, and property damage, with an aggregate of \$2,000,000. Coverage shall include: (1) contractual liability, (2) products and completed operations, (3) independent contractors, and (4) property in the care, control, or custody of Contractor. Extensions shall be added or exclusions deleted to provide the necessary coverage.~~
- ~~3. — **Automobile Liability.** Minimum limits of \$100,000/\$300,000/\$100,000.~~

QUALIFICATIONS — SIMILAR PROJECTS

This form to be included in quote response

Respondent (or a combination of the firm, individual, or project manager assigned to the work) must have successfully completed at least one during the \_\_\_ months prior to the date set for receipt of quotes. Include only those projects that are comparable to those required by the District (provide description). The projects/engagements/deployments must have been in place and operational for at least six months prior to the date set for receipt of quotes.

**Completed Project 1: \_\_\_\_\_ (add additional pages for more projects if needed)**

Client/Project Owner: \_\_\_\_\_  
\_\_\_\_\_

Current contact person with Client/Project Owner: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Address of Client/Project Owner: \_\_\_\_\_  
\_\_\_\_\_

Project description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

No. of Employees: \_\_\_\_\_ Start date: \_\_\_\_\_ Completion date: \_\_\_\_\_  
\_\_\_\_\_ (min: \_\_\_\_\_) (month/year) (month/year)

No. of Locations: \_\_\_\_\_  
\_\_\_\_\_ (min: \_\_\_\_\_)

Name(s) of assigned personnel:

Project manager: \_\_\_\_\_

Account manager: \_\_\_\_\_

Solution engineer: \_\_\_\_\_

Technical engineer: \_\_\_\_\_

Rollout engineer: \_\_\_\_\_

Technical coordinator: \_\_\_\_\_

Provisioning coordinator: \_\_\_\_\_