



REQUEST FOR QUOTATION – THIS IS NOT AN ORDER

RFQ # 191112

PLASTER REPAIRS AT ALLEGHENY CAMPUS

808 RIDGE AVE., PITTSBURGH, PA 15212

Please bid on the following and e-mail (mcvetic@ccac.edu) your reply to Mike Cvetic **no later than Monday, November 11, 2019.**

An insurance certificate as described on “Form B” (attached) must be submitted by the awarded vendor prior to any service being performed.

A pre-bid and site visitation will be held on Monday, November 4 at 1:00 PM. The assembly point will be the front of Byers Hall, Ridge Ave. at Galveston.

For construction-related questions, contact Ray Marks at rmarks@ccac.edu or 412-237-3072. For purchasing-related questions, contact Mike Cvetic at mcvetic@ccac.edu or 412-237-3146.

Payment terms: net 30 after completion of services on a monthly basis and receipt of invoice by CCAC. Vendor must be willing to invoice CCAC and allow 30 days for payment.

Scope of Work:

Provide all labor, material, equipment, and supervision required to:

- Prepare existing damaged non-asbestos plaster area in Byers Hall Room R-B011, Furnish and install embossed white fiberglass reinforced plaster (FRP) wall panels to cover damaged area, Wall panels to be installed with mechanically fastened adhesive, trim to be installed at raw edges of wall panels, approx. 135 SF of FRP.
- Prepare existing damaged non-asbestos plaster area in Jones Hall Basement Hallway, Furnish and install embossed white fiberglass reinforced plaster (FRP) wall panels to cover damaged area, Wall panels to be installed with mechanically fastened adhesive, trim to be installed at raw edges of wall panels, approx. 128 SF of FRP.
- Prepare existing damaged non-asbestos plaster area in Jones Hall Stairwell Entrance, Furnish and install embossed white fiberglass reinforced plaster (FRP) wall panels to cover damaged area, Wall panels to be installed with mechanically fastened adhesive, trim to be installed at raw edges of wall panels, approx. 96 SF of FRP.

Lump Sum Bid \$_____

Bidder's Name: _____

Company Name: _____

Phone: _____ Fax: _____

COMMUNITY COLLEGE OF ALLEGHENY COUNTY

800 Allegheny Avenue Pittsburgh, PA 15233

INSURANCE REQUIREMENTS

FORM B

Indemnification. To the fullest extent permitted by law, Contractor shall defend, indemnify and hold harmless the Community College of Allegheny County (CCAC), its agents, officers, employees, and volunteers from and against all claims, damages, losses, and expenses (including but not limited to attorney fees and court costs) to the extent directly arising from the acts, errors, mistakes, omissions, work or service of Contractor, its agents, employees, or any tier of its subcontractors in the performance of this Contract. The amount and type of insurance coverage requirements of this Contract will in no way be construed as limiting the scope of indemnification in this Paragraph.

Insurance. Contractor shall maintain during the term of this Contract insurance policies described below issued by companies licensed in Pennsylvania with a current A.M. Best rating of A- or better. At the signing of this Contract, and prior to the commencement of any work, Contractor shall furnish the CCAC Purchasing Department with a **Certificate of Insurance** evidencing the required coverages, conditions, and limits required by this Contract at the following address: Community College of Allegheny County, Purchasing Department, 800 Allegheny Avenue, Pittsburgh, PA 15233.

The insurance policies, except Workers' Compensation and Professional Liability, shall be endorsed to name Community College of Allegheny County, its agents, officers, employees, and volunteers as Additional Insureds with the following language or its equivalent:

Community College of Allegheny County, its agents, officers, employees, and volunteers are hereby named as additional insureds as their interest may appear.

All such Certificates shall provide a 30-day notice of cancellation. Renewal Certificates must be provided for any policies that expire during the term of this Contract. Certificate must specify whether coverage is written on an Occurrence or a Claims Made Policy form.

Insurance coverage required under this Contract is:

- 1) **Commercial General Liability** insurance with a limit of not less than \$1,000,000 per occurrence for bodily injury, property damage, personal injury, products and completed operations, and blanket contractual coverage, including but not limited to the liability assumed under the indemnification provisions of this Contract.
- 2) **Automobile Liability** insurance with a combined single limit for bodily injury and property damage of not less than \$1,000,000 each occurrence with respect to Contractor's owned, hired, and non-owned vehicles.
- 3) **Workers' Compensation** insurance with limits statutorily required by any Federal or State law and **Employer's Liability** insurance of not less than \$100,000 for each accident, \$100,000 disease for each employee, and \$500,000 disease policy limit.
- 4) **Professional Liability** insurance (where applicable) covering acts, errors, mistakes, and omissions arising out of the work or services performed by the Contractor, or any person employed by the Contractor, with a limit of not less than \$1,000,000 each claim.