

**PARISH OF ST. TAMMANY**

**SUPPLIER/SERVICE PROVIDER STATEMENT**

TO BE COMPLETED BY BUSINESSES/INDIVUALS REQUESTING TO BE SOLICATED TO PROVIDE MATERIALS AND SUPPLIES OR PERFORM TECHNICAL SERVICES FOR ST. TAMMANY PARISH GOVERNMENT. YOUR COMPLETION OF THIS PACKET DOES NOT GARUNTEE ANY WORK WITH ST TAMMANY PARISH.

FIRM NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

CONTACT: \_\_\_\_\_

SERVICE TYPE: \_\_\_\_\_

\_\_\_\_\_

OR

PRODUCT LINE: \_\_\_\_\_

\_\_\_\_\_

PLEASE LIST ANY OTHER INFORMATION THAT MAY BE USEFUL TO OUR SELECTION PROCESSES:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ARE YOU CURRENTLY REGISTERED TO DO BUSINESS IN THE STATE OF LOUISIANA: \_\_\_\_\_

DOES YOUR COMPANY HOLD ANY SPECIALITY LICENSES? If SO, PLEASE LIST: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**PLEASE COMPLETE THE ATTACHED IRS FORM W-9 AND ALSO PROVIDE A CURRENT INSURANCE CERTIFICATE. MAIL TO PO BOX 628 COVINGTON, LA 70434 ATTN: PURCHASING OR FAX TO (985) 898-5227**

Please be advised of the following insurance requirements:

- 1) Minimum Limits of Coverage are as follows:
  - a. Commercial General Liability \$1,000,000 each occurrence – including, but not limited to, coverage for Products & Completed Operations, Contractual, Personal Injury, Advertising Injury, etc.; endorsement for pollution occurrence when applicable.
  - b. Business Auto Liability \$1,000,000 combined single limit – including coverage for “any autos”, or owned, non-owned and hired autos;
  - c. Workers Compensation/Employers Liability \$500,000/\$500,000/\$500,000 – coverage for owners, officers, and/or partners shall be included in the policy and a statement of such shall be made by the producer on the face of the certificate provided; (Note: St. Tammany Parish does NOT accept exclusions of owners, officers, or partners.) ; Extension of coverage under USL&H in the above minimum limits when working over navigable waterways;
  - d. In addition, evidence of Professional Liability insurance with minimum limits of \$1,000,000 per claim may be required for some projects.
- 2) Comment section on the Certificate of Insurance shall make reference of the project(s) and location(s): Proj ##-###, Type of Work, Location
- 3) When applicable, the certificate shall make reference as to a Hold Harmless being in favor of St. Tammany Parish Government;
- 4) St. Tammany Parish Government shall be named as an additional insured by policy endorsement on the General Liability and Auto Liability;
- 5) Worker’s Compensation Policy shall provide an endorsement for a Waiver of Subrogation in favor of St. Tammany Parish Government;
- 6) Issuing insurer shall endeavor to provide 30 days written notice to St. Tammany Parish Government in case of policy cancellation or substantial policy change.
- 7) Insurance companies must be admitted in the State of Louisiana and have a Best rating of at least “A Class/Category VII”.

Purchasing Department