CONTRACT INSURANCE APPROVAL

DATE:

February 4, 2009

TO:

Faiza Steele

FAX: 363-4864 PONY: HRD 163

FROM:

Cecily Harris, Financial Services Manager

PHONE:

363-4027

FAX: 599-1721

PONY: PKR 128

The following is to be completed by the department before submission to Risk Management:

CONTRACTOR NAME: Local Government Commission

DOES THE CONTRACTOR TRAVEL AS A PART OF THE CONTRACT SERVICES? Yes

NUMBER OF EMPLOYEES WORKING FOR CONTRACTOR: 15

DUTIES TO BE PERFORMED BY CONTRACTOR FOR COUNTY:

The five major steps of the Planning Project involve: 1) Planning and coordination; 2) Data collection; 3) Publicity and outreach; 4) Charrette event; and Report and follow-up.

The following will be completed by Risk Management:

REMARKS/COMMENTS:

| INSURANCE COVERAGE: | Amount | Approve | Waive | Modify |
|---------------------------------|-----------|-----------|-------|--------|
| Comprehensive General Liability | arril | | | |
| Motor Vehicle Liability | \$ lvup | ₩ / | | |
| Professional Liability | & Irup | Ø | | |
| Workers' Compensation | Statutory | \square | | |

Faiza Steele Risk Management Analyst

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