

This Insurance Checklist is provided to vendors only as an informational tool, to assist with providing required documentation. The Insurance Checklist may be furnished to vendors’ insurance professionals to help clarify the insurance requirements for the Solicitation. This Insurance Checklist is not intended as a means through which to bind coverage. **This Insurance Checklist does not need to be returned with your Vendor Submission.**

#	Appendix H, Vendor Insurance Requirements, Section	Lots	Requirement	Yes, No, N/A
1	B, <i>Insurance Requirements, B.1, Commercial General Liability Insurance, and A.3, Certificates of Insurance/Notices</i>	1, 2, 3	Did you provide the required proof of Commercial General Liability Insurance with the limits and the coverages provided for in Sections B and B.1 by providing a certificate of insurance as required in Section A.3 with your Vendor Submission?	Y <input type="checkbox"/> N <input type="checkbox"/>
2	B, <i>Insurance Requirements, B.2, Business Automobile Liability Insurance, and A.3, Certificates of Insurance/Notices</i>	1, 2, 3	Did you provide the required proof of Business Automobile Liability Insurance with the limits and the coverages provided for in Sections B and B.2 by providing a certificate of insurance as required in Section A.3 with your Vendor Submission?	Y <input type="checkbox"/> N <input type="checkbox"/>
3	B.2, <i>Business Automobile Liability Insurance</i>	1, 2, 3	If your response to # 2 was No, did you submit the applicable signed attestation on a form provided by OGS, pursuant to Section B.2? If your response to # 2 was Yes, answer N/A.	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>
4	A.8, <i>Waiver of Subrogation</i>	1, 2, 3	Do your Commercial General Liability and Business Automobile Liability Insurance policies comply with the waiver of subrogation requirements in Section A.8?	Y <input type="checkbox"/> N <input type="checkbox"/>
5	A.9, <i>Additional Insured</i>	1, 2, 3	Did you provide the required Additional Insured Endorsement for your Commercial General Liability and Business Automobile Liability insurance policies with your Vendor Submission, pursuant to Section A.9?	Y <input type="checkbox"/> N <input type="checkbox"/>
6	B, <i>Insurance Requirements, and B.3, Technology Errors and Omissions</i>	1, 2	Do you agree to procure the required Technology Errors and Omissions Insurance with the limits and coverages provided for in Sections B and B.3 at or before the time of the first transaction with an Authorized User? If you are not submitting a Vendor Submission for Lot 1 or Lot 2, answer N/A.	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>
7	B, <i>Insurance Requirements, and B.3, Technology Errors and Omissions</i>	3	Did you procure the required Technology Errors and Omissions Insurance with the limits and coverages provided for in Sections B and B.3 at or before the time of Vendor Submission? If you are not submitting a Vendor Submission for Lot 3, answer N/A.	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>
8	B.3, <i>Technology Errors and Omissions</i>	1, 2	If your Technology Errors and Omissions Insurance policy is written on a claims made basis, do you agree to provide OGS with proof that the policy provides the option to purchase an extended reporting period, pursuant to the requirements in Section B.3, at or before the time of the first transaction with an Authorized User? If you are not submitting a Vendor Submission for Lot 1 or Lot 2, answer N/A.	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>

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9	B.3, <i>Technology Errors and Omissions</i>	3	If your Technology Errors and Omissions Insurance policy is written on a claims made basis, did you provide OGS with proof that the policy provides the option to purchase an extended reporting period, pursuant to the requirements in Section B.3, with your Vendor Submission? If you are not submitting a Vendor Submission for Lot 3, answer N/A.	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>
10	B, <i>Insurance Requirements</i> , and B.4, <i>Crime Insurance</i>	1, 2	Do you agree to procure the required Crime Insurance with the limits and coverages provided for in Sections B and B.4 at or before the time of the first transaction with an Authorized User? If you are not submitting a Vendor Submission for Lot 1 or Lot 2, answer N/A.	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>
11	B, <i>Insurance Requirements</i> , and B.4, <i>Crime Insurance</i>	3	Did you procure the required Crime Insurance with the limits and coverages provided for in Sections B and B.4 at or before the time of Vendor Submission? If you are not submitting a Vendor Submission for Lot 3, answer N/A.	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>
12	Appendix H <i>Insurance Requirements, Preamble</i>	1, 2, 3	Do all insurers providing the required insurance policies meet the minimum qualifications for insurers set forth in Appendix H, <i>Preamble</i> ?	Y <input type="checkbox"/> N <input type="checkbox"/>
13	A.2, <i>Policy Forms</i>	1, 2, 3	Are all required insurance policies written on an occurrence basis as required by Section A.2, or as otherwise provided in Appendix H?	Y <input type="checkbox"/> N <input type="checkbox"/>
14	A.4, <i>Primary Coverage</i>	1, 2, 3	Do all required insurance policies provide primary and non-contributory coverage as required by Section A.4?	Y <input type="checkbox"/> N <input type="checkbox"/>
15	A.6, <i>Self-Insured Retention/Deductibles</i>	1, 2, 3	If any of your required insurance policies include a self-insured retention or deductible, have you disclosed the self-insured retention or deductible to OGS, as required by Section A.6? If your required insurance policies do not include a self-insured retention or deductible, answer N/A.	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>
16	A.10, <i>Excess/Umbrella Liability Policies</i>	1, 2, 3	If you are providing any required insurance coverage limits through a combination of primary and umbrella/excess liability policies, do you agree to comply with the requirements of Section A.10? If you are not providing any required insurance coverage limits through a combination or primary and umbrella/excess liability policies, answer N/A.	Y <input type="checkbox"/> N <input type="checkbox"/> N/A <input type="checkbox"/>
17	A.11, <i>Notice of Cancellation or Non-Renewal</i>	1, 2, 3	Do all required insurance policies meet the requirements for notice of cancellation or non-renewal set forth in Section A.11?	Y <input type="checkbox"/> N <input type="checkbox"/>
18	B.5, <i>Workers' Compensation Insurance and Disability Benefits Requirements</i>	1, 2, 3	Did you provide the required proof of Workers' Compensation Insurance Coverage or a legal exemption by submitting one of the forms listed in Section B.5 with your Vendor Submission?	Y <input type="checkbox"/> N <input type="checkbox"/>
19	B.5, <i>Workers' Compensation Insurance and Disability Benefits Requirements</i>	1, 2, 3	Did you provide the required proof of Disability Benefits Insurance Coverage or a legal exemption by submitting one of the forms listed in Section B.5 with your Vendor Submission?	Y <input type="checkbox"/> N <input type="checkbox"/>