

Qualified Vendor Requirements

To be placed on the list of possible vendors please send the following information to:

Town of Windsor Health Department
Windsor Town Hall
275 Broad Street
Windsor, CT 06095

This Must Include:

Company name
Company address
Contact person
Phone number
Fax number
E-mail address

And Insurance Requirements:

- 1. Commercial General Liability Insurance:** Commercial General Liability insurance with a combined single limit of \$1,000,000 per occurrence, \$1,000,000 aggregate for bodily injury and property damage.
- 2. Commercial Automobile Liability Insurance:** Commercial Automobile Liability insurance with a combined single limit of \$1,000,000 per occurrence, \$1,000,000 aggregate, and shall include coverage for all owned, hired, and non-owned vehicles.
- 3. Worker's Compensation Insurance:** Worker's Compensation Insurance in the required amount as applies to the State of Connecticut and Employers Liability Insurance as follows:
 - Bodily Injury by Accident - \$100,000 each accident
 - Bodily Injury by Disease - \$500,000 policy limit
 - Bodily Injury by Disease - \$100,000 each employee
- 4. Umbrella Liability Insurance:** Commercial Umbrella Liability insurance with a combined single limit of \$1,000,000 per occurrence, \$1,000,000 aggregate for bodily injury and property damage.
- 5. Professional Liability Insurance:** Provide Professional Liability insurance with a combined single limit of \$1,000,000 per occurrence, \$1,000,000 aggregate