

Please sign this page as confirmation of receipt of Addendum No. 1
and immediately scan and e-mail back to kkostowniak@townofhamburgny.gov and
jkiener@townofhamburgny.gov

FAILURE TO DO SO MAY DISQUALIFY THE BIDDER

Return to: Town of Hamburg Engineering Department
6100 South Park Avenue
Hamburg, NY 14075

Project: Streetlighting Maintenance & Emergency Repair Service Contract
Project No. 23-11
Town of Hamburg

Date: August 17, 2023

The addendum contains 3 pages, including this sheet. Please verify receipt of all pages.

Bidders may pick up a hard copy of Addendum No. 1 at the Town of Hamburg Engineering Office, 6100 South Park Avenue, Hamburg NY 14075.

It is required that you complete and e-mail this page back as soon as possible as confirmation of receipt of Addendum No. 1. This page is part of our permanent records.

Signature: _____

Date: _____

Contractor: _____

August 17, 2023

Please sign and e-mail the attached confirmation sheet as soon as possible and add the signed addendum to your bid package. **Failure to do so may disqualify the bidder.**

1. Correction: On page GS-22, Sexual Abuse or Molestation Liability Insurance requirements listed in this section are not necessary.

Excess Liability and/or Umbrella Liability insurance.

~~.4 PROFESSIONAL LIABILITY: If the contractor's work on this project involves rendering professional services, including but not limited to preparing and/or approving maps, shop drawings, opinions, reports, surveys, field orders, change orders, drawings or specifications, or giving directions or instructions, or supervisory, inspection, architectural or engineering activities, the Contractor shall provide Professional Liability coverage for the Contractor's errors, omissions, and negligent acts arising from the performance of the Contractor's services under this contract. Coverage limits shall be the greater of the amounts indicated below or the amounts carried by the Contractor:~~

_____ Each Occurrence/Claim _____	_____ \$1,000,000
_____ Aggregate _____	_____ \$3,000,000

~~**.5 SEXUAL ABUSE OR MOLESTATION LIABILITY**~~

_____ Each Occurrence/Claim _____	_____ \$1,000,000
_____ Aggregate _____	_____ \$2,000,000

.6 DATA BREACH/CYBER LIABILITY

Each Occurrence/Claim	\$ 250,000
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3. WORKERS COMPENSATION AND EMPLOYER'S LIABILITY INSURANCE,

Coverage as required by New York State statutory limits.

4. NEW YORK DISABILITY (NYDBL)

Coverage as required by New York State statutory limits.