

Office of Risk Management

Jason T. Garnar, County Executive · Thomas J. Dellapenna Jr., Risk Manager

## **Insurance Requirements Questionnaire**

Ve	endo	or Information
	a.	Vendor Name (if known) CA#
	b.	Principal Contact
Aı	ntici	pated contract cost & term (including renewals)
	a. b.	☐ Contract Renewal (attach copy of existing insurance requirements) ☐ Sole / limited source
		<u>ically</u> describe work to be performed & any hazards normally associated with the formula of the following the fol
ty]	pe o	i work. Note any equipment (e.g. forkints, excavators) to be used.
Gi	ive l	ocation where vendor will do work
— М	otor	· Vehicle Use
	a.	☐ Vendor will come to county property
	b.	☐ Vender will drive while providing contract services
	c.	☐ Common Carrier Delivery <u>only</u> (e.g FedEx shipment)
	d.	☐ No motor vehicle use of any kind
De	_	tment Information
		Department Contact
	b.	Department
	c.	Extension