INSURANCE AGENT AFFIDAVIT

To be completed by appropriate Insurance Agent(s) and submitted by Bidder as a Bid attachment.

(Name of Bidder)

I, the undersigned agent, certify that the insurance requirements contained in the Request for Bids and as listed below, have been reviewed by me with the above identified Bidder. If the named Bidder is awarded a contract by the Lee College District ("the District"), I affirm that I will be able, within ten (10) days after Bidder is notified of such award, to furnish a valid Certificate of Insurance and/or applicable bonds to the District meeting all of the requirements contained in the Request for Bids for the coverage listed below: (Check all that apply):

(a) Commercial General Liability

(b)	 Bodily Injury: Property Damage Owner's/Contractor's Protective Liability
(c)	Business Vehicle Liability
	1. Bodily Injury:
	2. Property Damage:
(d)	Commercial Umbrella Liability
(e)	Worker's Compensationand Employers Liability
(f)	Payment Bond
(g)	Performance Bond
(h)	Builders Risk
Name of Insur	ance Agency:
Address of Ag	gency:City/State/ZIP:
Telephone Nu	mber:Facsimile Number:
Agent (Signat	ure):Date:
Agent (Print or Type):	

SUBSCRIBED AND SWORN to before me by the above named on this the _____day of

Notary Public in and for the State of ______ My Commission expires: ______ NOTE TO AGENT: IF THE ABOVE TIME REQUIREMENT IS NOT MET, THE DISTRICT RESERVES THE RIGHT TO DECLARE THIS BIDDER NON-RESPONSIVE. IF YOU HAVE QUESTIONS CONCERNING THESE REQUIREMENTS, PLEASE CALL THE DISTRICT'S PURCHASING DEPARTMENT AT (281) 425-6320.

Texas Education Agency - 1999