ADDENDUM ONE TO ALL FIRMS:

Reference: Request for Proposal (RFP) #LP071315

Commodity: Integrated Space Planning Consulting Services

Dated: July 13, 2015

Proposal Due: 3:00 p.m., EDT Tuesday July 28, 2015

Greetings:

Please reference the following for clarifications and changes to the RFP #LP071315 issued on July 13, 2015 for Integrated Space Planning Consulting Services:

**New Proposal Due Date:** no later than 2:00 p.m., EDT Friday July 31, 2015

**Strategic Plans:**

- University Cornerstone Plan
- Health System Strategic Plan
- School of Medicine Strategic Plan

**RFP Section F, Other Information, Insurance:**

Change to read as follows:

**Insurance**

Listed below is the insurance the Selected Firm must maintain under any Agreement resulting from this RFP. In no event should the Selected Firm construe these minimum required limits to be its limit of liability to the University. The Selected Firm will maintain insurance which meets or exceeds the requirements of the University with insurance companies that hold at least an A- financial rating with A.M. Best Company. No Agreement will be executed by the University until the Selected Firm satisfies the insurance requirements of the University. The Selected Firm may be required to provide the University with a valid Certificate of Insurance before providing any goods or services to the University. The University reserves the right to approve any insurance proposed by the Selected Firm.
Commercial General Liability:
The Selected Firm and any Subcontractor will provide a minimum combined single Limit of Liability for bodily injury and property damage of $1,000,000 per occurrence and a $2,000,000 aggregate with the following coverage:
{X } Premises/Operations  {X } Products/Completed Operations
{X } Contractual        {X } Personal Injury
{X } Additional Insured*

Errors and Omissions:
The Selected Firm and any Subcontractor will maintain a minimum Limit of Liability of $2,000,000 per claim for professional errors and omissions coverage.

Automobile Insurance:
The Selected Firm and any Subcontractor will provide a minimum combined single Limit of Liability for bodily injury and property damage of $500,000 per occurrence with the following coverages for vehicles operated by their employees.
{X } Any Automobile  {X } Owned and Non-Owned Automobiles

*Additional Insured:
The University will be named as an Additional Insured, and the proper name is: "The Commonwealth of Virginia, and the Rector and Visitors of the University of Virginia, its officers, employees, and agents."

If you have any questions concerning this Addendum or the RFP, please contact me at (434) 924-4216. Thank you for your participation in this RFP Process. I look forward to receiving your proposal.

Sincerely,

Lori Ponton
Senior Buyer

Please sign below, acknowledging receipt of this Addendum and return this document with your response to the RFP.

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Signature                                Name of Firm

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Please Print Name of Person Signing Above   Date