This form is required for all Organizational Housing Facilities that wish to request any changes, updates, or overall alterations to the facility or surrounding area. The organization must provide the following information for request to be considered:

- Requested Completion Date
- Name of Organization making request
- Contact Person – serves as primary point of contact for project (Housing Advisor, President, House Manager, etc.)
- Description of Requested Project
- Any Necessary Documents to Complete Project
- Anticipated Source of Funds (Who is paying to have the project completed?)

All projects requesting a completion date during the summer semester must submit this form with all necessary documentation no later than February 1st. All requests made after this date are subject to deferment due to regular summer maintenance.

Alterations to building and surrounding area can include, but are not limited to:

- Replacement of floors, appliances, cabinets, interior lighting, fans, etc.
- Painting of parlor, hallways, stairwells, doors, etc.
- Landscape Additions
- Installation of appliances (television mounting in parlor, cabinetry mounting, toilets, sinks, bathroom fixtures, etc.)

___

**FORM SUBMISSION**

All organizations requesting alterations to the organizational house or surrounding property must complete the necessary forms below and submit by mail, email, or fax:

<table>
<thead>
<tr>
<th>Email:</th>
<th>Mail:</th>
<th>Fax:</th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="mailto:universityhousing@selu.edu">universityhousing@selu.edu</a></td>
<td>University Housing</td>
<td>985.549.5118</td>
</tr>
<tr>
<td></td>
<td>SLU 10704</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hammond, LA 70402</td>
<td></td>
</tr>
</tbody>
</table>
# Alterations to Building Request Form

## INFORMATION

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Today’s Date</td>
<td></td>
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<tr>
<td>Requested Complete Date</td>
<td></td>
</tr>
<tr>
<td>Requesting Organization</td>
<td></td>
</tr>
<tr>
<td>Contact Name</td>
<td>Last</td>
</tr>
<tr>
<td></td>
<td>First</td>
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<tr>
<td></td>
<td>M.I.</td>
</tr>
<tr>
<td>Contact’s Position</td>
<td></td>
</tr>
<tr>
<td>Contact Email</td>
<td></td>
</tr>
<tr>
<td>Contact Phone</td>
<td></td>
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</tbody>
</table>

## DESCRIPTION OF WORK

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
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</thead>
<tbody>
<tr>
<td>Description</td>
<td></td>
</tr>
<tr>
<td>Documents of work included (Sketch, picture, order number, etc.)?</td>
<td>YES ☐ NO ☐</td>
</tr>
<tr>
<td>Reason for Request</td>
<td></td>
</tr>
<tr>
<td>Anticipated Source of Funds</td>
<td></td>
</tr>
<tr>
<td>Description of Materials</td>
<td></td>
</tr>
<tr>
<td>(Fire rating, specification, manufacturer, brand or style name)</td>
<td></td>
</tr>
<tr>
<td>Contact Signature</td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td></td>
</tr>
</tbody>
</table>

## OFFICE USE ONLY

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
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<tbody>
<tr>
<td>Approved</td>
<td></td>
</tr>
<tr>
<td>Denied</td>
<td></td>
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<tr>
<td>Deferred Until</td>
<td></td>
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<tr>
<td>Anticipated Start Date</td>
<td></td>
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<tr>
<td>Anticipated Completion Date</td>
<td></td>
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<tr>
<td>Facilities Maintenance Signature</td>
<td></td>
</tr>
<tr>
<td>Housing Director Signature</td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td></td>
</tr>
</tbody>
</table>
INSURANCE AND INDEMNIFICATION FOR CONTRACTORS

Before commencing work, the other party (contractor and/or subcontractor) shall obtain at its own cost and expense the following insurance with insurance companies authorized in the State, with an A.M. Best rating of A- : VI or higher and shall provide evidence of such insurance to the Agency, as may be required by the contracting agency. The policies or certificates thereof, shall provide that thirty days prior to cancellation notices of same shall be given to the Agency by registered mail, return receipt requested, for all of the following stated insurance policies. All notices shall name the other party and identify the agreement or contract number.

A. Workers' Compensation - Statutory - in compliance with the Compensation law of the State. Exception: Employers Liability is to be $1,000,000 when work is to be over water and involves maritime exposure. (A.M. Best's rating requirement mentioned may be waived for workers compensation coverage only.)

B. Commercial General Liability Insurance with a minimum limit of liability per occurrence of $1,000,000 for bodily injury and property damage. This insurance shall include the following coverages:

1. Premises - Operations
2. Broad Form Contractual Liability
3. Products and Completed Operations
4. Use of Contractors and Subcontractors
5. Personal Injury
6. Broad Form Property Damage

C. Automobile Liability Insurance with a minimum limit of liability per occurrence of $1,000,000 for bodily injury and property damage unless otherwise indicated in the contract specifications. This insurance shall include for bodily injury and property damage the following coverages:

1. Owned automobiles
2. Hired automobiles
3. Non-owned automobiles

Note: If the vendor/contractor does not own an automobile and an automobile is utilized in the execution of the contract, then only hired and non-owned coverage is acceptable. If an automobile is not utilized in the execution of the contract, then automobile coverage is not required.

Location of operation shall be "All Locations".

D. Other Party's Professional Liability - The other party shall provide proof of such insurance. (Minimum limits of $1,000,000). Required in the "Special Conditions" of the contract specifications.

E. If at any time any of the policies shall become unsatisfactory to the Agency as to form or substance, or if a company issuing any such policy shall become unsatisfactory to the Agency, the other party shall obtain a new policy, submit the same to the Agency for approval and submit a certificate of insurance as required in the contract. Upon failure of the other party to furnish, deliver and maintain such insurance as above provided, this contract at the election of the Agency may be forthwith declared suspended, discontinued or terminated. Failure of the other party to take out and/or maintain any required insurance, shall not relieve the other party from any liability under the contract, nor shall the insurance requirements be construed to conflict with the obligations of the other party concerning indemnification.
F. All policies and certificates of insurance of the other party shall reflect the following:

1) The other party's insurer will have no right of recovery or subrogation against the Agency, it being the intention of the parties that the insurance policies so affected shall protect both parties and the primary coverage for any and all losses covered by the described insurance.

2) The Agency shall be named as an "additional insured" as regards negligence by the contractor. (ISO Form CG 20 10 03 97).

3) The insurance companies issuing the policy or policies shall have no recourse against the Agency for payment of any premiums or for assessments under any form of policy.

G. The following Indemnification Agreement shall be, and is hereby, a provision of the contract:

The other party agrees to protect, defend, indemnify, save and hold harmless the State of Louisiana, all State Departments, Agencies, Boards and Commissions, its officers, agents, servants and employees, including volunteers, from and against any and all claims, demands, expense and liability arising out of injury or death to any person or the damage, loss or destruction of any property which may occur or in any way grow out of any act or omission of the other party, its agents, servants, and employees, or any and all costs, expense and/or attorney fees incurred by the other party as a result of any claim, demands, and/or causes of action except of those claims, demands, and/or causes of action arising out of the negligence of the State of Louisiana, all State Departments, Agencies, Boards, Commissions, its agents, representatives, and/or employees. The other party agrees to investigate, handle, respond to, provide defense for and defend any such claims, demand, or suit at its sole expense and agrees to bear all other costs and expenses related thereto, even if it (claims, etc.) is groundless, false or fraudulent.

H. Any and all deductibles in the below described insurance policies shall be assumed by and be for the amount of, and at the sole risk of the other party.

I. The insurance companies issuing the policy or policies shall have no recourse against the Agency for payment of any premiums or for assessments under any form of policy.

J. All property losses shall be made payable to and adjusted with the Agency.

K. Neither the acceptance of the completed work nor payment therefor shall release the Contractor/Subcontractor from his obligations from the insurance requirements or indemnification agreement.

L. Additional insurance may be required on an individual basis for extra hazardous contracts and specific service agreements. If such additional insurance is required for a specific contract, that requirement will be described in the "Special Conditions" of the contract specifications.

M. If any of the Property and Casualty insurance requirements (Exhibit A) are not complied with at their renewal dates, payments to the Contractor/Subcontractor may be withheld until those requirements have been met, or at the option of the Agency, the Agency may pay the Renewal Premium and withhold such payments from any monies due the Contractor/Subcontractor.

N. A General Contractor shall purchase and maintain property insurance upon the entire work included in the contract for an amount equal to the greater of the full-completed value of the amount of the construction contract including any amendments thereto (with the exception of the following sub-limit for flood/quake). Contractor's policy shall provide "ALL RISK" Builder's Risk Insurance (extended to include the perils of flood, earthquake, collapse,
vandalism/malicious mischief, and theft, including theft of materials whether or not attached to any structure.) Flood/earthquake sub-limit shall equal an amount no lower than ten percent (10%) of the total contract cost per occurrence. The "All Risk" Builder's Risk Insurance must also cover architects' and engineers' fees that may be necessary to provide plans and specifications and supervision of work for the repair and/or replacement of property damage caused by a covered peril.

A specialty contractor shall purchase and maintain property insurance upon the system to be installed for an amount equal to the greater of the full-completed value or the amount of the contract including any amendments thereto. The specialty contractor may provide an installation floater with the same coverage as the "ALL RISK" Builder's Risk insurance policy.

The policy must include the interest of the Owner, Contractor and Subcontractors as their interest may appear.

Policies insuring projects involving additions, alterations or repairs to existing buildings or structures must include an endorsement providing the following:

In the event of a disagreement regarding a loss covered by this policy which may also be covered by the State of Louisiana, Policy of self-insurance or any Commercial Property Insurance policy purchased by the State of Louisiana, Office of Risk Management (ORM) covering in excess of the State of Louisiana, Policy of self-insurance, this company agrees to follow the following procedure to establish coverage and/or the amount of loss:

Any party to a loss may make written demand for an appraisal of the matter in disagreement. Within 20 days of receipt of written demand, this company and either ORM or its commercial insurance company shall each select a competent and impartial appraiser and notify the other of the appraiser selected. The two appraisers will select a competent and impartial umpire. The appraisers will then identify the policy or policies under which the loss is insured and, if necessary, state separately the value of the property and the amount of the loss that must be borne by each policy. If the two appraisers fail to agree, they shall submit their differences to the umpire. A written decision by any two shall determine the policy or policies and the amount of the loss. Each insurance company (or ORM) agree that the decision of the appraisers and the umpire if involved, will be binding and final and that neither party will resort to litigation. Each of the two parties shall pay its chosen appraiser and bear the cost of the umpire equally.

The State of Louisiana Office of Risk Management (ORM) will provide builders risk coverage for all renovations up to $250,000, except those projects that involve foundations or underground work. For projects that involve foundations or underground work or renovations over $250,000, the contractor must provide coverage for the total value of the project. The ORM's policy will not provide coverage for any project that involves foundations, or any underground work. ORM will not provide coverage for any new construction. The ORM's policy will also provide flood and earthquake coverage on renovations up to the $250,000 limit, but will not provide this coverage if not covered by ORM per the above specifications.

On renovations over $250,000 and all new construction, flood coverage shall be provided by the Contractor on the first floor and below for projects North of the Interstate Corridor beginning at the Texas - Louisiana border at Interstate 10 East to the Baton Rouge junction of Interstate 12, East to Slidell junction with Interstate 10 to the Louisiana - Mississippi border. On projects South of this corridor, flood coverage shall be required on the first and second floors and below. Coverage for roofing projects shall not require flood coverage. The contractor has the right to purchase coverage or self-insure any exposures not required by the bid specifications, but shall be held liable for all losses, deductibles, self-insurance for coverages not required.
**EXHIBIT A**

INSURANCE REQUIREMENTS FOR CONTRACTORS

Contractor shall procure and maintain for the duration of the contract insurance against claims for injuries to persons or damages to property which may arise from or in connection with the performance of the work hereunder by the Contractor, his agents, representatives, employees or subcontractors. The cost of such insurance shall be included in the Contractor's quotation.

A. MINIMUM SCOPE OF INSURANCE

Coverage shall be at least as broad as:

1. Insurance Services Office form number GL 0002 (Ed. 1/73) covering Comprehensive General Liability and Insurance Services Office form number GL 0404 covering Broad Form Comprehensive General Liability; or Insurance Services Office Commercial General Liability coverage ("occurrence" form CG 0001). "Claims Made" form is unacceptable. The "occurrence form" shall not have a "sunset clause."

2. Insurance Services Office form number CA 0001 (Ed. 1/78) covering Automobile Liability and endorsement CA 0025 or CA 0001 12 93. The policy shall provide coverage for owned, hired, and non-owned coverage. If an automobile is to be utilized in the execution of this contract, and the vendor/contractor does not own a vehicle, then proof of hired and non-owned coverage is sufficient.

3. Workers' Compensation insurance as required by the Labor Code of the State of Louisiana, including Employers Liability insurance.

B. MINIMUM LIMITS OF INSURANCE

Contractor shall maintain limits no less than:

1. **Commercial General Liability**: $1,000,000 combined single limit per occurrence for bodily injury, personal injury and property damage.

2. **Automobile Liability**: $1,000,000 combined single limit per accident, for bodily injury and property damage.

3. **Workers Compensation and Employers Liability**: Workers' Compensation limits as required by the Labor Code of the State of Louisiana and Employers Liability coverage. Exception: Employers liability limit is to be $1,000,000 when work is to be over water and involves maritime exposure.

C. DEDUCTIBLES AND SELF-INSURED RETENTIONS

Any deductibles or self-insured retentions must be declared to and approved by the Agency. At the option of the Agency, either: the insurer shall reduce or eliminate such deductibles or self-insured retentions as respects the Agency, its officers, officials, employees and volunteers; or the Contractor shall procure a bond guaranteeing payment of losses and related investigations, claim administration and defense expenses.

D. OTHER INSURANCE PROVISIONS

The policies are to contain, or be endorsed to contain, the following provisions:

1. General Liability and Automobile Liability Coverages

a. The Agency, its officers, officials, employees, Boards and Commissions and volunteers are to be added as "additional insureds" as respects liability arising out of activities performed by or on behalf of the Contractor;
products and completed operations of the Contractor, premises owned, occupied or used by the Contractor. The coverage shall contain no special limitations on the scope of protection afforded to the Agency, its officers, officials, employees or volunteers. It is understood that the business auto policy under "Who is an Insured" automatically provides liability coverage in favor of the State of Louisiana.

b. Any failure to comply with reporting provisions of the policy shall not affect coverage provided to the Agency, its officers, officials, employees, Boards and Commissions or volunteers.

c. The Contractor's insurance shall apply separately to each insured against whom claim is made or suit is brought, except with respect to the limits of the insurer's liability.

2. Workers' Compensation and Employers Liability Coverage

The insurer shall agree to waive all rights of subrogation against the Agency, its officers, officials, employees and volunteers for losses arising from work performed by the Contractor for the Agency.

E. ACCEPTABILITY OF INSURERS

Insurance is to be placed with insurers with a Best's rating of A-:VI or higher. This rating requirement may be waived for workers’ compensation coverage only.

F. VERIFICATION OF COVERAGE

Contractor shall furnish the Agency with certificates of insurance affecting coverage required by this clause. The certificates for each insurance policy are to be signed by a person authorized by that insurer to bind coverage on its behalf. The certificates are to be received and approved by the Agency before work commences. The Agency reserves the right to require complete, certified copies of all required insurance policies, at any time.

G. SUBCONTRACTORS

Contractor shall include all subcontractors as insureds under its policies or shall furnish separate certificates for each subcontractor. All coverages for subcontractors shall be subject to all of the requirements stated herein.
This form is to be completed in its entirety and submitted with the quotation response form(s).

INSURANCE COVERAGES TO BE PROVIDED BY CONTRACTOR

Contractor is to list the name and address (street/city/state/zip) of the Louisiana licensed insurance company that is intended to be used to furnish the required minimum levels of insurance coverage if awarded the contract.

WORKER’S COMPENSATION AND EMPLOYER’S LIABILITY. ........................................... STATUTORY MINIMUM COVERAGE

Name of Insurer: ________________________________________________________________
(Not the Agent Company)

Insurer’s Address: ____________________________________________________________________

Check Insurer’s A.M. Best Rating: [   ] A Level / [   ] B, C, D, E, F Level

Check Best Financial Size Category Rating: [   ] VI or Greater; [   ] V or Less

If Not A.M. Best Rated - State Type of Insurer:

Agent Company: ____________________________________________________________ Telephone No: ________________________________

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COMMERCIAL GENERAL LIABILITY.................................................................................. $1,000,000 MINIMUM COVERAGE

Name of Insurer: ________________________________________________________________
(Not the Agent Company)

Insurer’s Address: ____________________________________________________________________

Check Insurer’s A.M. Best Rating: [   ] A Level / [   ] B, C, D, E, F Level

Check Best Financial Size Category Rating: [   ] VI or Greater; [   ] V or Less

Agent Company: ____________________________________________________________ Telephone No: ________________________________

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AUTOMOBILE LIABILITY ............................................................................................. $1,000,000 MINIMUM COVERAGE

Name of Insurer: ________________________________________________________________
(Not the Agent Company)

Insurer’s Address: ____________________________________________________________________

Check Insurer’s A.M. Best Rating: [   ] A Level / [   ] B, C, D, E, F Level

Check Best Financial Size Category Rating: [   ] VI or Greater; [   ] V or Less

Agent Company: ____________________________________________________________ Telephone No: ________________________________

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INDEMNIFICATION AGREEMENT

The Contractor agrees to protect, defend, indemnify, save and hold harmless the State of Louisiana, all State Departments, Agencies, Boards and Commissions, its officers, agents servants and employees, including volunteers, from and against any and all claims, demands, expense and liability arising out of injury or death to any person or the damage, loss or destruction of any property which may occur or in any way grow out of any act or omission of Contractor, its agents, servants, and employees, or any and all costs, expense and/or attorney fees incurred by Contractor as a result of any claim, demands, and/or causes of action except those claims, demands, and/or causes of action arising out of the negligence of the State of Louisiana, all State Departments, Agencies, Boards, Commissions, its agents, representatives, and/or employees. Contractor agrees to investigate, handle, respond to, provide defense for and defend any such claims, demand, or suit at its sole expense and agrees to bear all other costs and expenses related thereto, even if (claims, etc.) is groundless, false or fraudulent.

Accepted by Name of Insurer: ______________________________

Contractor Name ___________________________________________________________________________________________

Signature __________________________________________________________________________________________________

Title ______________________________________________________________________________________________________

Date Accepted __________________________________________________________________________________________________

Is Certificate of Insurance Attached? [ ] Yes [ ] No

Contract No. ____________________ for Southeastern Louisiana University

State Agency

PURPOSE OF CONTRACT:

______________________________________________________________________________________________________________

______________________________________________________________________________________________________________

______________________________________________________________________________________________________________