



Approved Installation Contractors Information

The City of Santa Cruz Water Department (SCWD) requires that water service applicants use only City-approved contractors for installation of new services. The names of such contractors are maintained on an “Approved Installation Contractors” list provided to water service applicants. To be considered for such approval and be included on the list, a contractor must meet the following requirements:

Eligibility Requirements for Approval:

1. Be licensed by the State of California as a General Engineering Contractor or a C34 Pipeline Contractor.
2. Have competently performed work similar to city water service installation, including working within a public street right-of-way, performing multiple “hot taps” and traffic control within the last five years.
3. Hold a City of Santa Cruz business license.
4. Hold insurance coverage that meets the City’s requirements.

Approval Process:

1. Contractor submits the attached application, with all required documentation.
2. SCWD will review the application, contact references, and make a determination of approval within one month.
3. Initial approval, if granted, will be on a trial basis, until the contractor has completed a minimum of three (3) separate water service installations to the satisfaction of the SCWD and the customer.
4. Upon successful completion of three installations, the contractor’s name and contact information will be placed on the approved list and provided directly to customers.

Requirements to Maintain Approval:

1. Must construct all facilities in conformance with the latest version of SCWD Standard Specifications.
2. Must comply with all instructions given in the field by the City’s authorized representatives.
3. Must complete a minimum of one (1) water service installation within any two (2) year period.
4. Must correct any deficiencies in its installations that are discovered within the one (1) year guarantee period, as described in the SCWD Standard Specifications.
5. Must maintain current copies of Certificates of Insurance and Santa Cruz business license on file with the SCWD.

Removal from List

A contractor may be removed from the “Approved Installation Contractors” list at anytime by the SCWD Deputy Director/Engineering Manager if determined out of compliance with any of the requirements shown above, or in any other way presents a risk to the quality and efficiency of the City Water System

CITY OF SANTA CRUZ WATER ENGINEERING OFFICE

212 Locust St, Suite C
Santa Cruz CA 95060
Phone 831-420-5210
Fax 831-420-5201

www.cityofsantacruz.com



Approved Installation Contractors Application Form

Contractor Name: _____

Contractor Email: _____

Name of Company: _____

State License Type/Number: _____

Company Mailing Address: _____

Company Phone #'s:

Office: _____ Cell: _____ Fax: _____

The undersigned hereby attests to the following:

- I have purchased, read and understand the latest revision of SCWD Standard Specifications, and agree to construct all City water facilities in conformance with those specifications.
- I have read and understand the Approved Installation Contractors Requirements and agree to comply with them.
- I shall defend and hold the City of Santa Cruz, its officers, agents and employees, free and harmless from and against any and all loss, cost, attorney's fees, suits, claims, or demands arising out of or related to the installation of water services and appurtenances by my company, its agents or employees.

I have attached the following required documents to this application:

- A summary of relevant work experience.
- A minimum of three (3) references, including name of company and telephone number, contact person, project address, and a description of the work I performed within the last five (5) years.
- A current copy of City of Santa Cruz Business License to perform work inside the city limits.
- A current Certificate of Insurance that meets the City's Insurance Requirements for Approved Contractors.

Contractor's Signature: _____ Date: _____

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www.ci.santa-cruz.ca.us

To:	From:
Fax:	Pages: 2
Phone:	Date:
Re: Insurance Request	CC:
Comments:	

A complete and correct certificate of insurance must be on file before your company can start or continue work for the City of Santa Cruz.

General Liability, Automobile Liability, Workers' Compensation, and Professional Liability Requirements:

- The limit for **each occurrence** must be at least \$1,000,000 (A combined single limit of \$1,000,000 is required for Automobile Liability).
- The certificate must have a policy number and current effective dates.
- The City of Santa Cruz, its officers, agents, and employees must be named as an additional insured (except for Workers' Compensation and Professional Liability only policies).
- The City of Santa Cruz must be named as the certificate holder.
- The cancellation clause must be revised as follows:
Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will ~~endeavor to~~ mail 30 days written notice to the certificate holder named to the left, ~~but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.~~
- The certificate is required to have an authorized representative signature.

Other insurance coverage may be needed if the Risk Manager deems appropriate.

Provide the following specific instructions to your insurance provider. **Please address any questions or concerns to the contact above.** If you are unable to comply with our requirements, have your insurance broker contact the Risk Manager, Jack Hain, at 831/420-5408.

Fax and/or mail correct certificates to the contact above. **Do not begin work until a purchase order has been issued on your company.**



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Insurance Producer:

Business Insured:

Fax a certificate of insurance, complying with the following requirements, to (831) 420-5201

Limits

Without limiting the foregoing in any way, Vendor shall carry standard form Commercial General Liability Insurance and Commercial Automobile Liability Insurance acceptable to the City in an amount not less than **One Million Dollars per occurrence** combined single limit Bodily Injury and Property Damage coverage.

Workers' Compensation

Vendor shall obtain and maintain, during the life of the agreement, Worker's Compensation Insurance, covering all of its employees on the project with a company satisfactory to City. Vendor shall be responsible for the insurance coverage as herein provided of all employees of said Vendor.

Cancellation Clause

Policies shall provide that the same cannot be canceled except upon thirty days' written notice to the City of Santa Cruz. The cancellation clause will read as follows:

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will ~~endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.~~

A Certificate of Insurance shall be furnished to the City as evidence of the above coverages and conditions before the commencement of work. Any statements that relieve the insurance company from liability if notice of cancellation is not sent are not acceptable.

Additional Insured

Except for Workers' Compensation, all insurance provided above shall name the City of Santa Cruz, its officers, agents and employees as an additional insured and shall include cross liability in favor of the City, its officers, agents and employees.

Certificate Holder

The City of Santa Cruz must be listed as certificate holder.

If you are unable to comply with the above requirements, the insurance broker should contact the Risk Manager, Jack Hain, at 831/420-5408. All other inquires should be made to _____ at 420-5210.

Thank you for your prompt attention