

RISK ASSESSMENT OR MODIFICATION OF INSURANCE TERMS

**Use this form to request a Risk Assessment and determine Proper Insurance Requirements
when developing an RFP-RFB, RFI or Contract/Agreement**

DATE SUBMITTED: 1-10-17

TO: CEO/Risk Management/600 W. Santa Ana Blvd., Suite 105 Fax: 714-285-5599
or e-mail this form to RiskMgmtInsurance@ocgov.com with Scope of Work and Contract/Agreement
Insurance Provisions. **If this is a renewal, attach prior Risk Management Approval(s).**

FROM: Frank Zuniga SSA
County Employee (Contact For Questions) County Department

frank.zuniga@ssa.ocgov.com (714) 541-7430 (714) 541-7414
County E-Mail Address Phone # (inc. area code) Fax # (inc. area code)

Note: The above action is advisory to departments as to risk assessment and protection. Any change in a current contract/agreement requires formal modification unless contract/agreement specifically delegates to County Risk Manager authority to modify insurance requirements.

CONTRACT TYPE: ☐ Commodities ☐ Public Works ☐ Service ☒ Human Services

☐ Consultant Svcs. ☐ Fixed Asset ☐ A & E ☒ Other Non-financial MOU

Vendor Name: Brandman University Contract ID/RFP I.D. Number: CFZ3217

Bid: YES ☐ NO ☒ Contract Amount: _____

Insurance Type To Be Reviewed for Waiver or Modification of Terms

<input type="checkbox"/> Commercial General Liability	<input checked="" type="checkbox"/> Workers' Compensation	<input type="checkbox"/> Property Insurance
<input type="checkbox"/> Commercial Auto Liability	<input checked="" type="checkbox"/> Employer's Liability	<input type="checkbox"/> Sexual Misconduct
<input type="checkbox"/> Contractual Liability	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Indemnification
<input type="checkbox"/> Professional Liability (Errors & Omissions)	<input type="checkbox"/> Limitation of Liability	

Request and Justification: (add another page if necessary)

1) MOU contains a mutual indemnification provision; and 2) WC does not apply - request to remove waiver
of subrogation requirement.

To Be Completed By CEO/Risk Management

☒ Approved ☐ Denied ☐ Approved as Modified

Comments: Mutual indemnification is appropriate as
both parties are actively engaged. WLC is not
applicable to interns.

Rhonda Marshall
Manager/CEO/Risk Management

1/10/17
Date