

## ADDING/UPDATING A VENDOR IN LOGOS

In order for the City of Concord to create purchase orders and subsequently pay invoices, each vendor must be properly entered into "Vendor Service" in the City's financial management software (Logos). Please provide the following information to ensure that your information is properly entered in Logos.

VENDOR NAME (as it appears on the W-9): \_\_\_\_\_

VENDOR WEBSITE URL: \_\_\_\_\_

1. PURCHASE ORDER MAILING ADDRESS:
2. PURCHASE ORDER PHONE NUMBER:
3. PURCHASE ORDER EMAIL ADDRESS:
4. PURCHASE ORDER FAX NUMBER:
5. REMIT ADDRESS:
6. REMIT PHONE NUMBER:
7. REMIT EMAIL ADDRESS:
8. REMIT FAX NUMBER:
9. STANDARD FREIGHT TERMS (FOB: DESTINATION OR FOB: ORIGIN):
10. STANDARD INVOICE PAYMENT TERMS (Net 30 Days, 2% 10 Net 20 Days etc.):
11. PROMPT PAYMENT TERMS (Ex. 2% 15 Net 30 Days etc.):
12. IDENTIFY THE GOODS/EQUIPMENT/SERVICES YOU WILL PROVIDE TO THE CITY:
13. W-9. Please complete and provide the attached W-9.
14. INDEMNIFICATION AND INSURANCE CERTIFICATE. If the vendor is coming onto City property to perform a service, the attached Indemnification Agreement must be completed and signed and the vendor must provide her/his firm's insurance certificate as detailed by the attached. If you have questions about the types and levels of coverage required please contact Tina Waterman.

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

Please send via mail, email or fax to: City of Concord, Purchasing Division, Attention: Tina M. Waterman, 311 North State Street, Concord, NH 03301; (603) 230-3656 (Fax); [twaterman@concordnh.gov](mailto:twaterman@concordnh.gov).



**CITY OF CONCORD, NEW HAMPSHIRE**

**INDEMNIFICATION AGREEMENT**

To the fullest extent permitted by law, Vendor shall protect, indemnify, save, defend and hold harmless the City of Concord, including its officials, agents, volunteers and employees (“Indemnified Parties”), from and against any and all liabilities, obligations, claims, damages, penalties, causes of action, costs, interest and expenses, including but not limited to reasonable attorney and paralegal fees, which Indemnified Parties may become obligated or suffer by reason of any accident, bodily injury, personal injury, death of person, economic injury, or loss of or damage to property, arising indirectly or directly under, out of, in connection with, or as a result of the Vendor’s contract with the City or the activities of Vendor or its agents, employees, contractors or subcontractors. In any case, the foregoing provisions concerning indemnification shall not be construed to require the Vendor to defend or indemnify the City for damage arising out of bodily injury to persons or damage to property caused by or resulting from the sole negligence of the City or its employees.

In addition, and regardless of respective fault, Vendor shall defend, indemnify and hold harmless the Indemnified Parties for any costs, expenses and liabilities arising out of a claim, charge or determination that Vendor’s officers, employees, contractors, subcontractors or agents are employees of the Indemnified Parties, including but not limited to claims or charges for benefits, wages, fees, penalties, withholdings, damages or taxes brought in connection with laws governing workers compensation, unemployment compensation, social security, medicare, state or federal taxation, and/or any other similar obligation associated with an employment relationship.

The Vendor’s obligations to defend, indemnify and hold harmless the Indemnified Parties hereunder shall survive the term of the Vendor’s contracts.

**COMPANY** \_\_\_\_\_

**TAXPAYER IDENTIFICATION NUMBER** \_\_\_\_\_

**AUTHORIZED SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**TELEPHONE** \_\_\_\_\_

**TOLL-FREE NUMBER** \_\_\_\_\_

**FAX NUMBER** \_\_\_\_\_

**E-MAIL ADDRESS** \_\_\_\_\_

**City of Concord, New Hampshire**  
**Insurance Requirements for All Vendors**

**Additional Coverage is Required if Checked** **Minimum Limits Required**

**Commercial General Liability**

General Aggregate	\$2,000,000
Products-Completed Operations Agg.	\$2,000,000
Personal and Advertising	\$1,000,000
Each Occurrence Injury	\$1,000,000
Fire Damage (Any One Fire)	\$ 50,000
Medical Expense (Any One Person)	\$ 5,000

- Occurrence
- Claims Made

**Additional Coverage to Include**

- |   |    |
|---|----|
| <input type="checkbox"/> Owners & Contractors' Protective – Limit | NA |
| <input type="checkbox"/> Underground/Explosion and Collapse       |    |

**Commercial Automobile Liability**

Combined Single Limit	\$1,000,000
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- Any Auto, Symbol 1
- Include Employees as Insured

**Additional Coverage to include:**

- |   |    |
|---|----|
| <input type="checkbox"/> Garage Liability               | NA |
| <input type="checkbox"/> Garage Keepers Legal Liability | NA |

**Workers Compensation**

NH Statutory including Employers Liability - Each Accident/Disease-Policy Limit/Disease-Each Employee	\$100,000/\$500,000/\$100,000
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**Commercial Umbrella**

May be substituted for higher limits required above	NA
<input type="checkbox"/> Follow Form Umbrella on ALL requested Coverage	

**Other**

- |   |    |
|---|----|
| <input type="checkbox"/> 1. Professional/Errors & Omissions     | NA |
| <input type="checkbox"/> 2. Builders Risk – Renovation Form     |    |
| All Risk completed value form including Collapse                | NA |
| Sublimit for Soft Cost Coverage                                 | NA |
| <input type="checkbox"/> 3. Installation Floater (Equipment)    | NA |
| <input type="checkbox"/> 4. Riggers Liability                   | NA |
| <input type="checkbox"/> 5. Environmental – Pollution Liability | NA |
| <input type="checkbox"/> 6. Aviation Liability                  | NA |
| <input type="checkbox"/> 7. Watercraft – Protection & Indemnity | NA |

(X) **The City of Concord must be named as Additional Insured with respect to general and automobile liability**



**City of Concord, New Hampshire**  
**FINANCE DEPARTMENT**  
**CONTROL & PURCHASING DIVISIONS**

311 NORTH STATE STREET, CONCORD, NH 03301  
(603) 225-8560 FAX: (603) 230-3656 [www.concordnh.gov](http://www.concordnh.gov)

June 26, 2018

Subject: **City of Concord Purchase Orders, Vendor Packing Lists and Invoices**

Dear Vendor:

To ensure the prompt payment of your invoices and in conformance with the City's Code of Ordinances, Chapter 31, Article 31-1, Purchasing Procedure, it is required that:

1. **Prior** to the delivery of any goods, equipment and/or services, a **valid and correct** City of Concord purchase order number must be issued to your firm. Invoices submitted without referencing a valid and correct City of Concord purchase order number will not be paid. To confirm if a City purchase order number is valid and correct, please contact the City's Purchasing Manager at (603) 230-3664.
  - a. Note: Delivery of goods, equipment and/or services detailed on a City of Concord purchase order shall indicate acceptance of the City's standard purchase order terms and conditions by the vendor. The City's standard purchase order terms and conditions may be viewed on-line at [www.concordnh.gov/Purchasing](http://www.concordnh.gov/Purchasing).
2. All subsequent packing lists must reference the following correct information:
  - a. Purchase order number
  - b. Ship-to address; and
  - c. Item(s) and quantities ordered, delivered and back-ordered.
3. All subsequent invoices, provided, in one (1) original and one (1) copy, to the bill-to address detailed on the purchase order, must reference the following correct information:
  - a. Purchase order number;
  - b. Invoice number and date;
  - c. Bill-to and Ship-to addresses;
  - d. Payment and freight terms;
  - e. Item(s) and quantities ordered, delivered and back-ordered;
  - f. AIA Form G702, Application & Certificate for Payment (only when applicable)

**INVOICES SUBMITTED WITHOUT THE CORRECT INFORMATION WILL BE RETURNED, WITHOUT PAYMENT, UNTIL ALL CORRECT INFORMATION IS PROVIDED.**

Please contact Gretchen Wood, Fiscal Technician III at (603) 230-3652 with any invoice payment questions you may have.

Very truly yours,

*Tina M. Waterman*

Tina M. Waterman  
Purchasing Manager  
(603) 230-3664

[twaterman@concordnh.gov](mailto:twaterman@concordnh.gov)

*Katie Graff*

Katie Graff  
Assistant Finance Director  
(603) 225-8581

[kgraff@concordnh.gov](mailto:kgraff@concordnh.gov)

cc:

Thomas J. Aspell, Jr, Administration, City Manager

Brian G. LeBrun, Finance Department, Deputy City Manager-Finance