

### **INSURANCE GUIDELINES**

Please review the following guidelines in order to obtain a certificate of insurance in a form acceptable to the City of Escondido.

1. The Certificate of Insurance must list insurance coverage required by your contract, permit or agreement with the City of Escondido. For example:

General Liability
Automobile Liability
Excess Liability
Workers' Compensation and Employers' Liability
Other (i.e., Professional Liability, Errors & Omissions, etc.)

- 2. The insurer affording coverage must be the name of the specific company, not the group, under which the insurance company operates.
- 3. The name of the insured as it appears on the Certificate must be the same name listed on the City contract, permit or agreement.
- 4. The Effective and Expiration dates of the policy must cover the contract, permit or agreement period.
- 5. The "Each Occurrence" limit indicated on the Certificate for General Liability must match that required in the contract, permit or agreement. A General Aggregate limit is not sufficient to meet City insurance requirements.
- 6. Insurance coverage must be provided by an A.M. Best's A or A- rated, Class V carrier or better, admitted in California, or if non-admitted, acceptable to the Department of Insurance. All carriers licensed but not admitted in California are required to provide a Service of Suit Endorsement. (Example attached)
- 7. A separate Additional Insured Endorsement, specifically naming the City of Escondido as an Additional Insured, must be submitted with the Certificate for each of the policies with the exception of the Workers' Compensation and Errors and Omissions policies. A Blanket Additional Insured Endorsement may be acceptable. Sample Additional Insured Endorsements are attached. The appropriateness of each endorsement will depend on the nature of the contract, permit or agreement. The endorsement must include the policy number and:

City of Escondido, its officials, employees and volunteers 201 North Broadway
Escondido, CA 92025

8. The company providing insurance must provide at least thirty (30) days written notice of cancellation or termination. The failure to provide or maintain insurance shall be considered a material breach of the condition of any contract, permit or agreement for which insurance is required.

## ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – (FORM B)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

**SCHEDULE** 

Name of Person or Organization:

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of "your work" for that insured by or for you.

## ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

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This endorsement modifies insurance provided under the following:	

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

**SCHEDULE** 

Name of Person or Organization:

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule as an insured but only with respect to liability arising out of your operations or premises owned by or rented to you.

# ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### **SCHEDULE**

Name of Person or Organization:	

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

- A. Section II Who Is An Insured is amended to include as an insured the person or organization shown in the Schedule, but only with respect to Iability arising cut of your ongoing operations performed for that insured.
- B. With respect to the insurance afforded to these additional insureds, the following exclusion is added:
  - 2. Exclusions

This insurance does not apply to "bodily injury" or "property damage" occurring after:

- (1) All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the site of the covered operations has been completed; or
- (2) That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

### ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### **SCHEDULE**

Name of Person or Organization:	
Location And Description of Completed Operations:	
Additional Premium:	

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

Section II – Who Is An Insured is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of "your work" at the location designated and described in the schedule of this endorsement performed for that insured and included in the "products-completed operations hazard".