Insurance Requirements

For insurance to be valid only one of the following two options needs to be fulfilled.

1) The insurance company needs to change the language in the cancellation policy to match the example Sample A.

OR

2) The insurance company must fill out the 2 pages attached to the City of El Segundo Insurance Requirements.

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS Certificate holder is named as additional insured per the attached form,

10 days notice of cancellation for non-payment of premium by registered or certified mail.

CERTIFICATE HOLDER

CANCELLATION

City of El Segundo Public Works Department 350 Main Street El Segundo, CA 90245

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL KNOWN MAIL *30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT,

HORIZED REPRESENTATIVE

ACORD 25 (2001/08) FAX: (310)640-0489

@ACORD CORPORATION 1988



DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS 10 day notice of cancellation applies for non-payment of premium.

The City of El Segundo, its officers, agents and employees are included as additional insured with regard to liability and defense of suits arising from "your work" performed by or on behalf of the named insured regardless of whether liability is attributable to the named insured or a combination of the named and the additional insured.

TIFICATE HOLDER

CANCELLATION

City of El Segundo Public Works Dept. 350 Main Street El Segundo, CA 90245-

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL XINX AND MAIL 30

XXXXXXXXXX by real Authorized Representative registered



City of El Segundo

Public Works Department Dana Greenwood, Public Works Director

NOTICE TO CONTRACTORS WORKING IN THE PUBLIC RIGHT-OF-WAY

 Contractors must meet the insurance requirements of Section 7-3 (Liability Insurance) and Section 7-4 (Worker's Compensation Insurance) of "<u>Standard Specifications for Public Works Construction</u>," (edition as specified in the plans and/or project specifications). Copies of the "Standard Specifications" are available from:

> Building News, Inc. 3055 Overland Avenue Los Angeles, CA 90034 310-202-7775

- 2. The Contractor's name, as shown on the Certificate of Insurance, <u>must be identical</u> to that under which the contract and/or permit is executed. The Contractor's <u>address must also be the same</u>. (Firms operating under "dba's" should be particularly mindful of this requirement).
- 3. The policy must be in force for the length of time provided in the contract and/or permit for completion of the work.
- 4. City of El Segundo "Additional Insured Endorsement" form (see reverse side) must be filled out and signed by insurance company and returned with the Insurance Certificate.

Failure to provide Insurance Certificates which meet the above requirements, within the time specified in the specifications, may result in delays in prosecution of the work, since no project may be started until an acceptable Certificate of Insurance has been provided.

THE COVERAGE SHALL PROVIDE THE FOLLOWING MINIMUM LIMITS:

BODILY INJURY

\$ 250,000 each person

\$ 500,000 each occurrence

\$ 500,000 aggregate products and completed operations

PROPERTY DAMAGE

\$ 100,000 each occurrence

\$ 250,000 aggregate

A COMBINED SINGLE LIMIT POLICY WITH AGGREGATE LIMITS IN THE AMOUNT OF \$ 1,000,000 WILL BE CONSIDERED EQUIVALENT TO THE REQUIRED MINIMUM LIMITS.

GENERAL LIABILITY ADDITIONAL INSURED ENDORSEMENT CITY OF EL SEGUNDO

In consideration of the premium charged and notwithstanding any inconsistent statement in the policy to which this endorsement is attached or any endorsement now or hereafter attached thereto, it is agreed as follows:

- ADDITIONAL INSURED. The City of El Segundo, its officers, agents and employees are included as additional
 insured with regard to liability and defense of suits arising from "your work" performed by or on behalf of the
 named insured regardless of whether liability is attributable to the named insured or a combination of the named
 and the additional insured.
- 2. CONTRIBUTION NOT REQUIRED. Any other insurance maintained by the City of El Segundo is excess of this insurance and will not contribute with it.
- 3. SEVERABILITY OF INTEREST. This insurance applies separately to each insured against whom claim is made or suit is brought except with respect to the company's limits of liability. The inclusion of any person or organization as an insured does not affect any right which such person or organization would have as a claimant if not so included.
- 4. CANCELLATION NOTICE. With respect to the interests of the City of El Segundo, this insurance may not be canceled, reduced in coverage or limits or non-renewed, except after thirty (30) days prior written notice by <u>REGISTERED OR CERTIFIED MAIL</u> has been given to the Public Works Director of El Segundo addressed as follows: Public Works Department, El Segundo City Hall, 350 Main Street, El Segundo, CA 90245
- 5. APPLICABILITY. The insurance pertains to the operations and/or tenancy of the named insured under all written agreements in force with the City of El Segundo unless checked here () in which case only the following specific agreements with the City of El Segundo are covered:
- 6. MAILING ADDRESS: Completed endorsements shall be issued to the City of El Segundo as follows:

PUBLIC WORKS DEPARTMENT El Segundo City Hall 350 Main Street El Segundo, CA 90245

7. CLAIMS: Underwriter's representative for claims pursuant to this insurance:

(area code) (telephone number)

TELEPHONE:

GENERAL LIABILITY ADDITIONAL INSURED ENDORSEMENT CITY OF EL SEGUNDO

(CONTI	NUED)		
10. Incl	iudes (check as applicable):		
() Bi () Pe () Ind () Pr () Co () Gi () Co () No () Fii () —	road Form Liability Endorsement road Form Property Damage ersonal Injury dependent Contractors remises and Operations kplosion Hazard ollapse/Underground Hazard roducts/Completed Operations fatercraft Liability arage keeper's Legal Liability cidental Medical Malpractice ontractual Liability wned Automobiles on-Owned Automobiles re Legal Liability		
11.	Type Coverage:		
12.	Limits of Liability:		
13.	Policy Period: From To:		
14.	() Deductible () Self-Insured Retention (check which)		
	of \$applies tocoverage.	() Per Claim	() Per Occurance
15.	Other provisions:		
16.	Names Insured and Address:		
17.	Insurance Company:		
18.	Policy Number:		
19.	Endorsement Number:		
20.	Effective Date of Endorsement:		

1 *****