CITY OF JUNCTION CITY Public Works Construction Standards

Sample Insurance Certificate
Appendix C

ACORD. CERTIFICATE OF INSURANCE

DATE (MIM/DD/YY)

PRODUCER

MSJ/AFD

SAMPLE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

	COMPANIES AFFORDING COVERAGE
COMPANY A	
COMPANY	
	F
COMPANY	
COMPANY	

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CCR 	TYPE OF INSURANCE	Œ	POLICY NUMBER	POLICY EFFECTIVE DATE (MINUTERY)	POLICY EXPIRATION DATE (MM/DD/YY)	Гриц я		
•	REVIERAL LIABILITY					GENERAL AGGREGATE	\$	1,000,000
X	COMMERCIAL GENERAL	LIABILITY				PRODUCTS-COMP/OF AGG		
	CLAIMS MADE	C. OCCUR				PERSONAL & ADV INJURY	\$	1,000,000
X	OWNER'S & CONT PROT			ŧ		EACH OCCURRENCE	\$	1,000,000
				•	•	FIRE DAMAGE (Arry one fire)	-	1,000,000
	•						\$	50,000
A	UTOMOBILE LIABILITY					MED EXP (Any one person)	\$	5,000
X	ANY AUTO	•			1	COMBINED SINGLE LIMIT	\$	1,000,000
X	ALL OWNED AUTOS	!			1		-	
X	SCHEDULED AUTOS				i	BOOILY INJURY (Per person)	6	
- 3	HIRED AUTOS					,p		
Ŕ	NON-OWNED AUTOS					BODILY INJURY (Per accident)	\$	
						PROPERTY DAMAGE	\$	
0	ARAGE LIABILITY				9	AUTO ONLY - EA ACCIDENT	s	
	ANY AUTO					OTHER THAN AUTO ONLY:	_	-
						EACH ACCIDENT	\$	
	· 					AGGREGATE	6	
E	XCEES LIABILITY			, , , , , , , , , , , , , , , , , , ,		EACH OCCURRENCE		
	UMBRELLA FORM			4		AGGREGATE	\$	
	OTHER THAN UMBRELL	FORM		•	l		\$	
W	DRIKERS COMPENSATION A	IND		(1		STATUTORY LIMITS		
	MPLOYERS' LIABILITY					EACH ACCIDENT	3	100,000
	HE PROPRIETOR/ ARTNERS/EXECUTIVE	INCL	-			DISEASE - POLICY LIMIT	\$	500,000
0	FFICERS ARE:	EXCL		1		DISEASE - EACH EMPLOYEE	_	100,000
a	THER						•	
		:						
		· 						
ESCRI	PTION OF OPERATIONS/LOC	ATIONS/VEHICLES	SPECIAL ITEMS					

CERTIFICATE HOLDER

City of Junction City PO Box 250 680 Greenwood Junction City, OR 97448

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CAMCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDERLY AND MAIL 30 DAYS WRITTEN NOTICE TO THE CENTIFICATE HOLDER NAMED TO THE LEFT, BUT HALVALE HOLDER WAS ALLAWAY ON HALVALE HOLDER HALVALE HAL

AUTHORIZED REPRESENTATIVE

ACORD 25-8 (3/93)

@ ACORD CORPORATION 1993

THIS ENDORSEMENT CHANGES THE POLICY, PLEASE READ IT CAREFULLY.

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:

City of Junction City PO Box 250 680 Greenwood Junction City, OR 97448

- 1. 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.
- 2. With respect to 1. above the following additional provisions apply:
 - 4. Other Insurance.

The insurance afforded by this Coverage Part is primary insurance and we will not seek contribution from any other insurance available to the insured unless the other insurance is provided by a contractor. Then we will share with that other insurance by the method described below.

If all of the other insurance permits contribution by equal shares, we will follow this method also. Under this approach, each insurer contributes equal amounts until it has paid its applicable limit of insurance or none of the loss remains, whichever comes first.

If any of the other insurance does not permit contribution by equal shares, we will contribute by limits. Under this method, each insurer's share is based on the ratio of its applicable limit of insurance to the total applicable limits of insurance of all insurers.

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