

CERTIFICATE OF LIABILITY INSURANCE

ONEGR-1

OP ID: KD

DATE (MM/DD/YYYY) 11/05/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

certificate holder in lieu of such endorsement(s).													
PRODUCER							CONTACT NAME:						
								PHONE FAX (A/C, No, Ext): (A/C, No):					
								E-MAIL ADDRESS:					
								INSURER(S) AFFORDING COVERAGE					
								INSURER A : Mesa Underwriters Specialty					
INSURED							INSURER B :						
Name of Business / Organization Covered by Insurance							INSURER C :						
Address							INSURER D :						
							RER E :						
City, State, Zip							INSURER F:						
COVERAGES CERTIFICATE NUMBER						NUMBER:	REVISION NUMBER:						
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. INSR POLICY EFF POLICY EXP													
LTR		TYPE OF INSU	RANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS	3		
Α	Х	COMMERCIAL GENE								EACH OCCURRENCE	\$	1,000,000	
		CLAIMS-MADE	X OCCUR			Minimum amount of Ge		10/21/2015	10/21/2016	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000	
				Х		Liability is \$1,000,000 p				MED EXP (Any one person)	\$	5,000	
				^		occurrence, \$2,000,000)			PERSONAL & ADV INJURY	\$	Excluded	
	GEI	N'L AGGREGATE LIMIT	APPLIES PER:			aggregate.				GENERAL AGGREGATE	\$	2,000,000	
	X	POLICY JECT	LOC							PRODUCTS - COMP/OP AGG	\$	2,000,000	
	OTHER:				M	Minimum of \$1,000,000 Automob Liability for vehicle access if company vehicle is driven onto ci property other than designated parking lot. Personal vehicles are					\$		
Α	ANY AUTO							10/21/2015	10/21/2016	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
										BODILY INJURY (Per person)	\$		
		ALLOWNED X SCHEDULED AUTOS NON-OWNED AUTOS AUTOS								BODILY INJURY (Per accident)	\$		
										PROPERTY DAMAGE (Per accident)	\$		
	A0103		A0103			rohibited.				(* D. Datasan,	\$		
		UMBRELLA LIAB	X OCCUR		Ľ					EACH OCCURRENCE	\$	2,000,000	
В	X	EXCESS LIAB	CLAIMS-MADE					10/21/2015	10/21/2016	AGGREGATE	\$	2,000,000	
		DED X RETENTION \$									\$		
		WORKERS COMPENSATION								PER X OTH-	•		
Α	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					WA STOP GAP		10/21/2015	10/21/2016	E.L. EACH ACCIDENT	\$	1,000,000	
				N/A							\$	1,000,000	
										E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
The City of Bellevue, its officials, employees, and volunteers are listed as Additional Insureds. Note – if you leave off location and event date from the description area the certificate will remain on file through the expiration date and cover all of your activities scheduled in Bellevue Parks.													
CERTIFICATE HOLDER							CANCELLATION						

CERTIFICATE HOLDER

City of Bellevue
PO Box 90012
Bellevue, WA 98009-9012

City of Bellevue, WA 98009-9012

City of Bellevue, WA 98009-9012

City of Bellevue
Accordance With the Policy Provisions.

Authorized Representative

Authorized Representative

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ATTACHMENT "B"

INSURANCE REQUIREMENTS

The Contractor shall procure and maintain for the duration of this Agreement insurance against claims for injuries to persons or damages to property which may arise from or in connection with the performance of the work hereunder by the Contractor, his agents, representatives, employees or subcontractors. The cost of such insurance shall be paid by the Contractor. Insurance shall meet or exceed the following unless otherwise approved by the City.

A. Minimum Insurance

- 1. Commercial General Liability coverage with limits not less than \$1,000,000 per occurrence / \$2,000,000 annual aggregate.
- 2. Stop Gap/Employers Liability coverage with limits not less than \$1,000,000 per accident/disease,
- 3. Commercial Automobile Liability coverage with limits not less than \$1,000,000 per accident for any auto.
- 4. Workers' Compensation coverage as required by the Industrial Insurance Laws of the State of Washington.

B. Self-Insured Retentions

Self-insured retentions must be declared to the City.

C. Other Provisions

- 1. Commercial General Liability policies shall be endorsed to:
 - a. Include the City, its officials, employees and volunteers as additional insureds,
 - b. Provide that such insurance shall be primary as respects any insurance or self-insurance maintained by the City.
- 2. Contractor or its Insurance Agent/Broker shall notify the City of any cancellation, or reduction in coverage or limits, of any insurance within seven (7) days of receipt of insurers' notification to that effect.

D. Acceptability of Insurers

Insurance shall be placed with insurers with an AM Best Rating of A:VII or better.

E. Verification of Coverage

Contractor shall furnish the City with certificates of insurance required by this clause. The certificates are to be received and approved by the City before work commences. The City reserves the right to require complete, certified copies of all required insurance policies at any time.

F. Subcontractors

Contractor shall require subcontractors to provide coverage which complies with the requirements stated herein.