Understanding the Acord Certificate of Liability Insurance

1. PRODUCER: Insurance Agent/Broker who issues certificate for the Insured; answers questions; revises certificate to meet contract requirements.

2. NAME OF INSURED: Must be the legal name of contracting entity.

3. TYPES OF INSURANCE: Must include types of insurance required by contract.

4. INSURER(S): The insurance company providing the coverage (A, B, C, etc. corresponds to #4).

5. POLICY FORM: Must indicate "Claims Made" or "Occurrence" form. Most common is "Occurrence" which means coverage applies if there are covered damages during the policy period, regardless of when the claim is made, but within the statute of limitations. "Claims Made" means notice of claim must be made during the policy period.

6. AUTO TYPE: Must indicate type of autos covered. "All Auto" is preferred to cover all types.

7. DESCRIPTION OF OPERATIONS/ SPECIAL PROVISIONS
   Description of Operations: Must identify project name and contract number.

8. CERTIFICATE HOLDER: Must be the Regents of the University of California, include campus, department, and contact person. Certificate Holder does not mean that the University has been named as an Insured.

9. NOTICE OF CANCELLATION: Notice will be delivered in accordance with the policy provisions.

10. AUTHORIZED REPRESENTATIVE: Must be signed by an authorized representative of the Producer referenced under #1 above.

11. POLICY EXPIRATION DATE: Insurance expires at 12:01AM on the Policy Expiration Date indicated. If "Occurrence" form, date must be later than the date of contract termination. If "Claims Made", coverage must remain in effect for a period not less than three years following the date of contract termination.

12. LIMITS OF INSURANCE: Must be the same or greater than required by contract. Refer to BUS 63 - Exhibit D for the appropriate limit requirements by contract, or consult local Risk Management.

13. POLICY EFFECTIVE DATE: Must be prior to or coincide with effective date of the contract.

14. INSURER(S) AFFORDING COVERAGE: The insurance company providing the coverage (A, B, C, etc. corresponds to #4).

15. DISCLAIMER STATEMENT: A certificate only summarizes information about the Insured's insurance in effect at the time certificate is issued.
Bill Jones Insurance Agency

Smith Mechanical

P. O. Box 41229

Claymore, CA 92906

Certificate of Liability Insurance

EFFECTIVE DATE:

NAMED INSURED

POLICY NUMBER

CARRIER

NAIC CODE

ADDITIONAL REMARKS

Special Provisions:

1. The Regents of the University of California, The University of California, University, and each of their Representatives, consultants, officers, agents, employees, and each of their Representative's consultants, regardless of whether or not identified in the Contract Documents or to the Contractor in writing, are included as additional insureds on the general liability policy as required by contract and pursuant to additional insured endorsement CG2010 (11/85) or a combination of both CG 2010 (10/01 or 07/04) and CG 2037 (10/01 or 07/04) but only in connection with (contract number)__________ (project name)____________.

2. The General Liability coverage shall contain a Severability of Interest provision and shall be primary insurance as respects The Regents of the University of California, its officers, agents and employees. Any insurance or self-insurance maintained by The Regents of the University of California shall be excess of and non-contributory with this insurance.

3. The Professional Liability insurance policy shall include Contractual Liability coverage for liability that would exist in the absence of the contract.

Provision #3 is required only if professional services are being provided under the contract.