City of Pasadena INSURANCE

Name of Company:
Project Location:
Job Description:
1. PLEASE PROVIDE THE BELOW LISTED DOCUMENTS TO YOUR PROJECT MANAGER.
2. PLEASE SUBMIT THESE IN ONE (1) PACKAGE OR EMAIL WHEN YOU HAVE ALL
DOCUMENTS IN HAND, ALONG WITH THIS CHECK LIST, BECAUSE THEY WILL BE FORWARDED OVER AS A GROUP TO OUR RISK MANAGER FOR APPROVAL:
Include on one or two Acord forms with the coverage limits, policy numbers, and dates for:
A. General Liability: Combined Single Limit of \$1,000,000 per occurrence. Additional Insured Endorsement form(s) Naming as Additional Insured ("City of Pasadena, its Council Members, Commissioners, officers, employees and agents.")
Please provide either this form: CG 20 12;
or both of these forms
☐ Endorsement Waiver of the Right of Subrogation for General Liability against the City of Pasadena.
B. Auto Liability: \$100,000 combined single limits unless vehicles are not involved.
C. Worker's Comp and Employer's Liability in statutory amounts. A separate certificate may be submitted. The City need not be named as additional insured. Endorsement Waiver of the Right of Subrogation for Worker's Comp against the City of Pasadena.
D. There is a 24-48 hour turn around approval time for insurance before Permits can be issued
Note: The Specification or Request for Insurance may be amended by the City, to require less or greater requirements depending on the potential risk involved.
Submit fax documents to 626-396-8999 or
Email to pw-permits@cityofpasadena.net
Include the permit job location and description of work

OTHER CRITICAL INCLUSIONS:

1. The City of Pasadena shall be given 30 days written notice of cancellation or material change. The certificate submitted will not be approved if it contains "best effort" modifiers or if it relieves the insurer from responsibility for failure to give notice.



for Additional Insured Endorsement form

Note:

This sample is for reference purpose only.

Endorsement pages with different formats are acceptable.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s) City of Pasadena Office of the City Attorney Liability Claims Information required to complete this Schedule, if not shown above, will be shown in the Declarations.