

**The City of San Diego**  
**Minimum General Liability Insurance Requirements**  
**Special Events**

Special Event Organizers, Host Organizations, Event Promoters, and Vendors

**Minimum Coverage Limits:**

1 Million - Occurrence

2 Million - General Aggregate

**Coverages:**

In addition to Commercial General Liability insurance, The City of San Diego requires all participants in Special Events to have coverage in place for their specific operations (Liquor Liability, Auto Liability)

Each event organizer, host organization, event promoter and vendor that will have paid employees at the event is required by The City of San Diego to provide a copy of their **Workers Compensation Insurance**.

**Named Insured on the Policy:**

The City of San Diego requires that it be named as an additional insured on the policy/certificate of insurance:

**The City of San Diego, it's Officers, Employees and Agents**  
**Risk Management**  
**1200 Third Ave Suite 1000**  
**San Diego, CA 92101**

The description section on the certificate should list the time, dates and event for which the certificate is held

**Additional Insured Endorsement:**

**The City of San Diego also requires an additional endorsement accompany each certificate of insurance also naming The City of San Diego as an additional insured.**

Please note that the above limits are minimum. The City of San Diego Risk Management Department may adjust the coverage limits and coverage requirements due to the size and scope of each specific event.

Scott Davidson  
Claims Representative II  
Liability Division/Risk Management  
619-533-3946  
Fax 619-236-6106  
sdavidson@sandiego.gov

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/30/2008

**PRODUCER**  
Marsh USA, Inc.  
1301 5th Avenue, Suite 1900  
Seattle, WA 98101  
Attn: Seattle.CertRequest@marsh.com  
  
065563-CAS-09-10

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.

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INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: ACE American Insurance Company	22667
INSURER B: ACE Fire Underwriters Co	20702
INSURER C: ACE Property And Casualty Ins Co	20699
INSURER D: American Zurich Insurance Company	40142
INSURER E: Safety National Casualty Corp.	15105

**INSURED**

**COVERAGES**

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

NSR/ADD'L LTR/INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY		01/01/09	01/01/10	EACH OCCURRENCE \$ 2,000,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES(Ea occurrence) \$ 1,000,000	
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ EXCLUDED	
	<input checked="" type="checkbox"/> SIR \$100,000				PERSONAL & ADV INJURY \$ 2,000,000	
	GENERAL AGGREGATE LIMIT APPLIES PER					GENERAL AGGREGATE \$ 3,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC				PRODUCTS - COMP/OP AGG \$ 3,000,000	
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$	
<input type="checkbox"/> ALL OWNED AUTOS		BODILY INJURY (Per accident) \$				
<input type="checkbox"/> SCHEDULED AUTOS		PROPERTY DAMAGE (Per accident) \$				
<input type="checkbox"/> HIRED AUTOS						
<input type="checkbox"/> NON-OWNED AUTOS						
<input checked="" type="checkbox"/> Comp Deductible: \$1,000						
<input checked="" type="checkbox"/> Coll Deductible: \$1,000						
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$	
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$	
					AUTO ONLY: AGG \$	
C	EXCESS/UMBRELLA LIABILITY		01/01/09	01/01/10	EACH OCCURRENCE \$ 5,000,000	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$ 5,000,000	
	<input type="checkbox"/> DEDUCTIBLE				\$	
	<input type="checkbox"/> RETENTION \$				\$	
					\$	
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		01/01/09	01/01/10	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		01/01/09	01/01/10	E.L. EACH ACCIDENT \$ 1,000,000	
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$ 1,000,000	
	OTHER EXCESS				E.L. DISEASE - POLICY LIMIT \$ 1,000,000	
E	WORKERS' COMPENSATION		01/01/09	01/01/10	WORK COMP Statutory	
	SIR \$375,000				STOP GAP, EACH OCCUR 1,000,000	
					STOP GAP, AGGREGATE 1,000,000	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
 School  
 The City of San Diego, its elected officials, officers, employees, representatives and agents are an additional insured as respects their interests in the operations of the named insured as required by written contract regarding general liability. General liability coverage is primary and noncontributory.

<b>CERTIFICATE HOLDER</b>	SEA-001105243-05	<b>CANCELLATION</b>
City of San Diego 1200 Third Avenue, Suite 1100 San Diego, CA 92101-4106		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
		AUTHORIZED REPRESENTATIVE of Marsh USA Inc. Meg Lucia

POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED-OWNERS, LESSEES OR CONTRACTORS -SCHEDULED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COMMERCIAL AUTO LIABILITY

**SCHEDULE**

<p><b>Name of Person or Organization;</b>  CITY OF SAN DIEGO, ITS RESPECTIVE ELECTED OFFICIALS, OFFICERS, EMPLOYEES, AGENTS, AND REPRESENTATIVES</p>
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(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

A. Section II - Who is an Insured 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 ongoing operations performed for that insured.

B. With respect to the insurance afforded to these additional insureds, the following exclusion is added:

**2. Exclusions**

This Insurance does not apply to "bodily injury" or "property damage" occurring after:

(1) All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the site of the covered operations has been completed; or

(2) That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

**Hired & Non-Owned Automobiles Included**