LIABILITY INSURANCE:

The Permittee shall furnish the Agency a certificate of liability insurance with the Agency named as certificate holder and a copy of the Additional Insured Endorsement to the general liability insurance of the permittee's contractor. Notwithstanding any inconsistent statement in the policy or any subsequent endorsement attached thereto, the Agency shall be named as an additional insured covering the work, whether liability is attributable to the Permittee or the Agency.

1. The Permittee may file insurance acceptable to the Agency covering more than one permit. The coverage shall provide the following minimum limits:

General Aggregate Limit	\$2,000,000
Other than Products/Completed Operations Aggregate	.\$2,000,000
Products/Completed Operations Aggregate Limit	\$2,000,000
Personal Injury Limit	.\$1,000,000
Each Occurrence	\$1.000.000

- 2. A combined single limit policy with aggregate limits in the amount of \$ 2,000,000 will be considered equivalent to the required minimum limits.
- 3. Workers' Compensation and Employers' Liability insurance in an amount and form to meet all applicable requirements of the Labor Code of the State of California, which includes Employers' Liability coverage with limits of not less than \$1,000,000 per accident and which specifically covers the persons and risks involved in this Permit. Permittee understands and agrees that all persons furnishing services pursuant to this Permit are, for purposes of Workers' Compensation liability, employees solely of Permittee and not of County. Permittee shall bear the sole responsibility and liability for furnishing Workers' Compensation benefits to any person for injuries arising from or connected with services performed on behalf of Permittee pursuant to the Permit. The insurance company shall have a policy rating equal to or better than that of the California State Compensation Insurance Fund (SCIF).
- 4. Automobile Liability insurance with limits of not less than \$1,000,000 for bodily injury and property damage, in combined or equivalent split limits, for each single accident. Insurance shall cover liability arising out of Permittee's use of autos pursuant to the permit, including owned, leased, hired, and/or non-owned autos, as each may be applicable.

The Policy or Policies shall be endorsed to provide that the insurer waives all rights of subrogation against the Agency, and its respective elected officials, officers, employees, agents, and representatives for losses paid under the terms of the policy or policies and which arise from work performed by the named insured pursuant to this permit.

All liability insurance policies shall bear an endorsement or shall have attached rider whereby it is provided that, in the event of expiration or proposed cancellation of such policies for any reason whatsoever, the Agency shall be notified by mail, giving a sufficient time before the date thereof to comply with any applicable law or statute, but in no event less than 30 days before expiration or cancellation is effective.

The Additional Insured Endorsement to the general liability insurance must contain the following language:

"The County of Los Angeles and public entity or Special District for which the Los Angeles County Board of Supervisors is the Governing Body, and their Agents, Officers and Employees."

ACORD, CERTIFIC	CATE OF LIAB	ILITY INS	URANCE		DATE (MM/DD/YYYY) 01/01/2013	
PRODUCER INSURANCE BROKER OR COMPAN	Y NAME AND CONTACT	ONLY AN	ND CONFERS N	UED AS A MATTER OF O RIGHTS UPON THE ATE DOES NOT AMEN	INFORMATION E CERTIFICATE	
INFORMATION, INCLUDING EMAIL	ADDRESS			AFFORDED BY THE PO		
		INSURERS	AFFORDING COV	ERAGE	NAIC#	
INSURED	INDUNENA.					
COMPANY NAME AND CONTACT INFORMATION, INCLUDING A INSURER B:						
VALID EMAIL ADDRESS INSURER D: INSURER D:						
INSURER E:						
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.						
INSR ADD'L LTR INSRD TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS		
GENERAL LIABILITY	GL8050623	08/01/12	08/01/13	EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000	
X COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR				PREMISES (Ea occurence) MED EXP (Any one person)	\$ 500,000 \$ 10,000	
CEAIWS MADE 17 OCCUR		M K		RSONAL & ADV INJURY	\$ 1,000,000 \$ 1,000,000	
	Sar			GENERAL AGGREGATE	\$ 2,000,000	
GEN'L AGGREGATE LIMIT APPLIES PER:	Vai		JI	ODUCTS - COMP/OP AGG	\$ 2,000,000	
POLICY PROJECT X LOC AUTOMOBILE LIABILITY ANY AUTO	TP988035201	08/01/12	08/01/13	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
X ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	\$	
X HIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$	
				PROPERTY DAMAGE (Per accident)	\$	
GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
ANY AUTO				OTHER THAN AUTO ONLY: AGG	\$	
EXCESS/UMBRELLA LIABILITY	006502599	08/01/12	08/01/13	EACH OCCURRENCE	\$ 2,000,000	
X OCCUR CLAIMS MADE	⊥ II policy expirations M	IUST be valid	<u> </u>	AGGREGATE	\$ 2,000,000	
until after permit expiration date						
WORKERS COMPENSATION AND	FACRUB3175M68411	08/01/12	00/04/42	WC STATU- OTH- TORY LIMITS ER	\$	
EMPLOYERS' LIABILITY	FACRUB3173W00411	06/01/12	08/01/13	TORY LIMITS ER	\$ 1,000,000	
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000	
If yes, describe under SPECIAL PROVISIONS below OTHER				DISEASE - POLICY LIMIT	\$ 1,000,000	
Office	J ai		ノーて	7		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES / EXCLUSIONS ADDED BY ENDORSE	EMENT / SPECIAL POVIS	SIONS	ı		
CERTIFICATE HOLDER		CANCELLA	TION			
COUNTY OF LOS ANGELES	ONOGED ANT OF THE ABOVE BEGONDED FOLIOIES BE					
DEPARTMENT OF PUBLIC WORKS			CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE			
LAND DEVELOPMENT DIVISION P. O. BOX 1460			ISSUING INSURER SHALL MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER.			
ALHAMBRA, CA 91802-1460	/					
ATTENTION: AUTHORIZED REPRESENTATIVE						
ACORD 25 (2001/08) © ACORD CORPORATION 1988						

Must use this address

Sign Here

© ACORD CORPORATION 1988

POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY CG 20 12 05 09

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – STATE OR GOVERNMENTAL AGENCY OR SUBDIVISION OR POLITICAL SUBDIVISION – PERMITS CR AUTHORIZATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

MUST include this section verbatim

State Or Governmental Agency Or Subdivision Or Politica Subdivision:

The County of Los Angeles and public entity or Special District for which the Los Angeles County Board of Supervisors is the Governing Body, and their Agents, Officers and Employees.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II – Who Is An Insured is amended to include as an insured any state or governmental agency or subdivision or political subdivision shown in the Schedule, subject to the following provisions:

- This insurance applies only with respect to operations performed by you or on your behalf for which the state or governmental agency or subdivision or political subdivision has issued a permit or authorization.
- This insurance does not apply to:
 - a. "Bodily injury", "property damage" or "personal and advertising injury" arising out of operations performed for the federal government, state or municipality; or
 - "Bodily injury" or "property damage" included within the "products-completed operations hazard".