

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/24/2013

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).

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PRODUCER	CONTACT Paige E. Allen, CISR				
Malloy Imrie & Vasconi Insurance Services LLC - Napa P.O. Box 640	PHONE (A/C, No, Ext): (707) 255-2111 FAX (A/C, No): (707) 2				
Napa, CA 94559	E-MAIL ADDRESS: pallen@mivinsurance.com				
	INSURER(S) AFFORDING COVERAGE				
	INSURER A: Travelers Indemnity Company of Connecticut	25682			
INSURED	INSURER B : St. Paul Fire & Marine Ins				
Bell Products Inc.	INSURER C: Travelers Property Casualty Co of America	25674			
P. O. Box 396	INSURER D:				
Napa, CA 94559	INSURER E:				
	INSURER F:				

COVERAGES CERTIFICATE 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 LTR	TYPE OF INSURANCE	ADDL INSR	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
	GENERAL LIABILITY					,	EACH OCCURRENCE	\$	1,000,000
Α	X COMMERCIAL GENERAL LIAB	ILITY X		DT22-CO-5C764233-13	1/1/2013	1/1/2014	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000
	CLAIMS-MADE X OC	CCUR					MED EXP (Any one person)	\$	5,000
							PERSONAL & ADV INJURY	\$	1,000,000
							GENERAL AGGREGATE	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES	PER:					PRODUCTS - COMP/OP AGG	\$	2,000,000
	POLICY X PRO- JECT	LOC						\$	
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
Α	X ANY AUTO	1		810-5C764233-13	1/1/2013	1/1/2014	BODILY INJURY (Per person)	\$	
	AUTOS AUTOS						BODILY INJURY (Per accident)	\$	
	HIRED AUTOS NON-C	OWNED S					PROPERTY DAMAGE (PER ACCIDENT)	\$	
								\$	
	UMBRELLA LIAB X OC	CCUR				EACH OCCURRENCE	\$	5,000,000	
В	X EXCESS LIAB CL	AIMS-MADE		ZUP-12P79340-13-NF	1/1/2013	1/1/2014	AGGREGATE	\$	5,000,000
	DED X RETENTION \$							\$	5,000,000
С	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			UB-5C764233-13	1/1/2013	1/1/2014	X WC STATU- TORY LIMITS OTH- ER		
	ANY PROPRIETOR/PARTNER/EXECU-	JTIVE Y/N	N/A				E.L. EACH ACCIDENT	\$	1,000,000
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Mt. Diablo Unified School District, its officers and employees; State of California; Construction Manager(s); Project Manager(s); Inspector(s); and Architects(s) are named as Additional Insureds per the attached endorsement with primary wording in regards to Multi-Site HVAC Modernization: El Monte ES, Monte Garden ES, Shadelands Center, Sunrise ES & Westwood ES.

CERTIFICATE HOLDER	CANCELLATION
	CANCELLAI

Mt. Diablo Unified School District 1936 Carlotta Drive Concord, CA 94519-1397 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

: She H. Imhi

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED (CONTRACTORS)

This endorsement modifies insurance provided under the following: COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

NAME OF PERSON(S) OR ORGANIZATION(S):

Mt. Diablo Unified School District, its officers and employees; State of California; Construction Manager(s); Project Manager(s); Inspector(s); and Architects(s) 1936 Carlotta Drive Concord, CA 94519-1397

PROJECT/LOCATION OF COVERED OPERATIONS:

Multi-Site HVAC Modernization: El Monte ES, Monte Garden ES, Shadelands Center, Sunrise ES & Westwood ES.

- **1.** WHO IS AN INSURED (Section II) is amended to include the person or organization shown in the Schedule above, but:
- a) Only with respect to liability for "bodily injury", "property damage" or "personal injury"; and
- b) If, and only to the extent that, the injury or damage is caused by acts or omissions of you or your subcontractor in the performance of "your work" on or for the project, or at the location, shown in the Schedule. The person or organization does not qualify as an addi-tional insured with respect to the independent acts or omissions of such person or organiza-tion.
- **2.** The insurance provided to the additional insured by this endorsement is limited as follows:
- a) In the event that the Limits of Insurance of this Coverage Part shown in the Declarations exceed the limits of liability required by a "written contract requiring insurance" for that additional insured, the insurance provided to the additional insured shall be limited to the limits of liability required by that "written contract requiring insurance". This endorsement shall not increase the limits of insurance described in Section III Limits Of Insurance.

- b) The insurance provided to the additional insured does not apply to "bodily injury", "property damage" or "personal injury" arising out of the rendering of, or failure to render, any professional architectural, engineering or surveying services, including:
- i. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders or change orders, or the preparing, approving, or failing to prepare or approve, drawings and specifications; and
- **ii. Supervisory**, inspection, architectural or engineering activities.
- c) The insurance provided to the additional insured does not apply to "bodily injury" or "property damage" caused by "your work" and included in the "products-completed operations hazard" unless a "written contract requiring insurance" specifically requires you to provide such coverage for that additional insured, and then the insurance provided to the additional insured applies only to such "bodily injury" or "property damage" that occurs before the end of the period of time for which the "written contract requiring insurance" requires you to provide such coverage.

- **3.** The insurance provided to the additional insured by this endorsement is excess over any valid and collectible "other insurance", whether primary. excess, contingent or on any other basis, that is available to the additional insured for a loss we cover under this endorsement. However, if a "written contract requiring insurance" for that additional insured specifically requires that this insurance apply on a primary basis or a primary and non-contributory basis, this insurance is primary to "other insurance" available to the additional insured which covers that person or organization as a named insured for such loss, and we will not share with that "other insurance". But the insurance provided to the additional insured by this endorsement still is excess over any valid and collectible "other insurance", whether primary, excess, contingent or on any other basis, that is available to the additional insured when that person or organization is an additional insured under such "other insurance".
- **4.** As a condition of coverage provided to the additional insured by this endorsement:
- a) The additional insured must give us written notice as soon as practicable of an "occurrence: or an offense which may result in a claim. To the extent possible, such notice should include:
- **i.** How, when and where the "occurrence" or offense took place;
- **ii.** The names and addresses of any injured persons and witnesses; and
- **iii. The** nature and location of any injury of damage arising out of the "occurrence" or offense.
- **b)** If a claim is made or "suit" is brought against the additional insured, the additional insured must:

- i. Immediately record the specifics of the claim or "suit" and the date received and
 - ii. Notify us as soon as practicable.

The additional insured must see to it that we receive written notice of the claim or "suit" as soon as practicable.

- c) The additional insured must immediately send us copies of all legal papers received in connection with the claim or "suit", cooperate with us in the investigation or settlement of the claim or defense against the "suit", and otherwise comply with all policy conditions.
- d) The additional insured must tender the defense and indemnity of any claim or "suit" to any provider of "other insurance" which would cover the additional insured for a loss we cover under this endorsement. However, this condition does not affect whether the insurance provided to the additional insured by this endorsement is primary to "other insurance" available to the additional insured which covers that person or organization as a named insured as described in paragraph 3. Above.
- **5.** The following definition is added to SECTION V. DEFINITIONS:

"Written contract requiring insurance" means that part of any written contract or agreement under which you are required to include a person or organization as an additional insured on this Coverage Part, provided that the "bodily injury" and "property damage" occurs and the "personal injury" is caused by an offense committed:

- **a.** After the signing and execution of the contract or agreement by you;
- **b.** While that part of the contract or agreement is in effect; and
 - c. Before the end of the policy period.