

Christopher Gonzales

From: Christopher Gonzales
Sent: Monday, November 02, 2009 8:28 AM
To: 'mred2@earthlink.net'
Subject: RE: City of La Mesa contract with Edawrd Henning & Associates
Attachments: sample cert and endorsement.pdf

Ed,

Typically, the endorsements are simply companions to the certificates. The certificates have little weight with respect to proof of insurance whereas the endorsements verify the policy has been changed to add the City of La Mesa as an additional insured. I've not had any contractors balk at the endorsements after providing the certificates.

I'll attach one that we received recently from another professional service provider in hopes it helps move things along.

From: Ed Henning [mailto:mred2@earthlink.net]
Sent: Thursday, October 29, 2009 6:28 PM
To: Christopher Gonzales
Cc: owen at LPL Ins; Gloria at State Farm
Subject: RE: City of La Mesa contract with Edawrd Henning & Associates

Chris - regarding insurance endorsements, Section 15D of the Agreement you forwarded contains superfluous language that does not apply in some cases to either one of my carriers. Please take a look at the attached insurance certificate used by the City of LA which includes pre-printed in the middle section the exact endorsement provisions and language they're looking for with no confusion or questions asked. You must have something similar for the City of La Mesa or a sample from another service vendor that you can forward to me for both commercial liability and auto insurance that I can in turn forward to my respective agents for their endorsement. Feel free to black out the names if that makes it easier.

Thanks.

Ed Henning
mred2@earthlink.net



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/09/2009

PRODUCER
Jim Pennock Agency
PO Box 2454
San Marcos, CA 92079
PH: 760-798-1926; FX: 760-708-1925

INSURED
Greg Reuel
DIA/ GCH Marketing
8411 Natick Ln
Canoga Park, CA 91304

THIS CERTIFICATION 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.

INSURERS AFFORDING COVERAGE

INSURER A: RLI Insurance Company
INSURER B:
INSURER C:
INSURER D:
INSURER E:

NAIC #


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 TYPE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A x	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR G/LN'L AGGREGATE LIMIT AMOUNT PER POLICY: 1,000,000 1,000,000 1,000,000	BCP 002619B	12/05/2008	12/06/2009	EACH OCCURRENCE: \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence): \$ 100,000 MED EXP (Any one person): \$ 5,000 PERSONAL & ADV INJURY: \$ 1,000,000 GENERAL AGGREGATE: \$ 1,000,000 PRODUCTS - COMMOD AGG: \$ 1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> RATED AUTOS <input type="checkbox"/> NON OWNED AUTOS				COMBINED SINGLE LIMIT (Per accident): \$ BODILY INJURY (Per person): \$ BODILY INJURY (Per accident): \$ PROPERTY DAMAGE (Per accident): \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - PA ACCIDENT: \$ OTHER THAN AUTO ONLY: LA AGG: \$ AGG: \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE: \$ RETENTION: \$				EACH OCCURRENCE: \$ AGGREGATE: \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROHIBITION/EXCLUSION/EXCEPTIVE OFFICER/EMPLOYEE EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS: \$ OTHER: \$ P-I EACH ACCIDENT: \$ P-I DISEASE - PA EMPLOYEES: \$ P-I DISEASE - POLICY LIMIT: \$
	OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Economic Development and Market Research

<p>CERTIFICATE HOLDER</p> <p>Additional Insured: City of La Mesa 8130 Allison Ave La Mesa, CA 91941 ATT: Chris Gonzales PH: 619-607-1177, FX: 619-667-1380 CC: 608-638-5511</p>	<p>CANCELLATION</p> <p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL endeavor TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE EFFECT, BUT FAILURE TO DO SO SHALL IMPROSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.</p> <p>AUTHORIZED REPRESENTATIVE</p> 
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Administrative Copy

BUSINESSOWNERS
BP 12 01 07 02

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

BUSINESSOWNERS POLICY CHANGES

THIS ENDORSEMENT FORMS A PART OF THE POLICY NUMBERED BELOW.

POLICY NUMBER	POLICY CHANGES EFFECTIVE	COMPANY
BOP0028198	09/09/08	RII Insurance Company
NAMED INSURED	AUTHORIZED REPRESENTATIVE	
GREG REUEL DBA GCR MARKETING		
CHANGES		
<ul style="list-style-type: none">Additional Insured Endorsement form, BOP 407, has been added.		

09/10/08 Superior Access Ins. Services/10A17 Superior Access Ins. Services/69399

BP 12 01 07 02

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