



RECREATION AND COMMUNITY SERVICES DEPARTMENT

QUINLAN COMMUNITY CENTER

10185 NORTH STELLING ROAD • CUPERTINO, CA 95014

(408) 777-3120 • FAX (408) 777-1305

Liability Insurance Requirements-
For Facility Rentals

The person listed on the contract must obtain commercial general liability insurance in the amount of \$1,000,000 per occurrence. This may be obtained through your homeowner's policy or other insurance carrier. The user's insurance coverage shall be primary. **The City of Cupertino, Its Officers, Officials & Employees** are to be covered as additional insured by an endorsement for commercial general liability coverage.

- ✓ The renter's name must be listed as the one "insured".
- ✓ The policy must not expire before the event date.
- ✓ The policy must be for \$1,000,000 per occurrence.
- ✓ The policy must have "host liquor liability", if serving alcohol.
- ✓ The "description" must list the rental location, date of event, and type of event planned.
- ✓ The City of Cupertino at 10300 Torre Avenue, Cupertino, CA 95014 must be listed as "additional insured." See below for specific wording.

The original **certificate of insurance** and **endorsement** must be submitted to the Quinlan Community Center, Recreation and Community Services Department, 10185 N Stelling Rd, Cupertino, CA 95014, at least 30 days prior to the event. Your event may be cancelled if the certificate of insurance and endorsement fulfilling all requirements are not received by the City of Cupertino at least 30 days prior to the event date.

Please use the following address on the insurance certificate under "**Certificate Holder**":

City of Cupertino, Its Officers, Officials & Employees
10300 Torre Ave
Cupertino, CA 95014
Attn: Recreation & Community Services / Facilities

The following addresses pertain to the rental facilities of the City of Cupertino:

Quinlan Community Center
10185 N Stelling Rd
Cupertino, CA 95014

Community Hall
10350 Torre Ave
Cupertino, CA 95014

Creekside Park
10455 Miller Ave
Cupertino, CA 95014



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Liability Insurance Requirements- **Frequently Asked Questions**

Question: What is a certificate of liability insurance?

Answer: It is an insurance policy designed to provide protection in which an event holder must defend themselves against lawsuits or pay damages for bodily injury or property damage to a third party. This policy also gives protection to the venue of the event by adding them to the policy as an Additional insured. Examples, such as a slipping and falling, or damaged floors are covered by this type of policy.

Question: I've been asked to list my facility as an Additional Insured? What does this mean?

Answer: This simply means that the venue is asking you to add them to the required liability insurance policy as an insured.

The practice of adding a facility as an Additional Insured on a General Liability insurance policy is quite common. Make sure to tell your insurance agent that you need this endorsement before they give you the Certificate of Insurance.

Question: Where can I find an insurance provider?

Answer: You can check with your homeowner's insurance carrier, or search online. There are many online insurance companies that can help you with this service. Search for "Certificate of Liability Insurance for Event" to research all your options. The City of Cupertino does not sell insurance.

Question: Do insurance companies charge for this service?

Answer: It depends on your insurance provider. Your insurance agent will be able to help you with the fees, if applicable.

Question: I'm only serving coffee at my event. Do I really need to provide insurance?

Answer: No, the City of Cupertino only requires insurance for any events that serve alcohol.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/08/2015

PRODUCER <div style="border: 1px solid red; padding: 5px; color: red;">Insurance Agency Information</div>		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.	
INSURED <div style="border: 1px solid red; padding: 5px; color: red;">Renter's Name and Address</div>		INSURERS AFFORDING COVERAGE INSURER A: Essex Insurance Company INSURER B: INSURER C: INSURER D: INSURER E:	NAIC # 39020

Must be at least \$1,000,000

These boxes must be selected.

Event Date

INSR 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 <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Host Liquor Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> Retail Liquor Liability	<div style="border: 1px solid red; padding: 2px; color: red;">XX1234</div> <div style="border: 1px solid red; padding: 2px; color: red;">XX1234</div>	<div style="border: 1px solid red; padding: 2px; color: red;">08/08/2015</div> <div style="border: 1px solid red; padding: 2px; color: red;">08/08/2015</div>	<div style="border: 1px solid red; padding: 2px; color: red;">08/09/2015</div> <div style="border: 1px solid red; padding: 2px; color: red;">08/09/2015</div>	EACH OCCURRENCE INCLUDES BODILY INJURY & PROPERTY DAMAGE \$ 2,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 DEDUCTIBLE \$ 1,000 \$								
	<div style="border: 1px solid red; padding: 2px; color: red;">Host Liquor Liability must be included in policy, if serving alcohol.</div> HIRED AUTOS NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$							
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$								
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$								
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<table border="1"> <tr> <td>WC STATUTORY LIMITS</td> <td>OTHER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> </tr> </table>	WC STATUTORY LIMITS	OTHER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$
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E.L. DISEASE - EA EMPLOYEE	\$												
E.L. DISEASE - POLICY LIMIT	\$												
	OTHER												

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

Certificate holder is an additional insured pursuant to attached endorsement for the following event:
 Birthday party on August 8, 2015 at the Quinlan Community Center, 10185 N. Stelling Road, Cupertino, CA 95014.
 (Above information must include: Date, location, type of event, and City of Cupertino additional insured)

CERTIFICATE HOLDER <div style="border: 1px solid red; padding: 5px; color: red;"> City of Cupertino, Its Officers, Officials, & Employees 10300 Torre Ave. Cupertino, CA 95014 Attn: Recreation and Community Services/ Facilities </div>	CANCELLATION 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 <div style="border: 1px solid red; padding: 2px; color: red;">Insurance Agent Signature</div>
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Policy Number: XX1234

COMMERCIAL GENERAL LIABILITY
CG 20 26 07 04

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

Must be included on
the endorsement.

Name Of Additional Insured Person(s) Or Organization(s)
<div style="border: 1px solid red; padding: 5px; color: red;">City of Cupertino, Its Officers, Officials & Employees 10300 Torre Ave Cupertino, CA 95014 Attn: Recreation and Community Services/ Facilities</div>
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 additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.