

APPENDIX J

INSURANCE REQUIREMENTS TABLE

County of San Bernardino
 Department of Community Development and Housing (CDH)
COMMUNITY DEVELOPMENT BLOCK GRANT INSURANCE REQUIREMENTS TABLE
 (Note: Detailed requirements are contained in County of San Bernardino Standard Practice No. 11-07SP)

<u>Regarding:</u>	<u>If:</u>	<u>Then:</u>	<u>Requirements/Coverages/Limits:</u>				
1. Workers Compensation Insurance (W.C.)	A. Contractor has only employees OR both employees and volunteers,	(1) W.C. coverage is required.	(a) Evidence of current coverage required				
	B. Contractor has only volunteers,	(1) W.C. coverage <u>may</u> be waived by the Risk Management Division based on the Contractor's signed statement saying it <u>has no "employees,"</u> as defined by the State Labor Code. (2) If waiver is denied, County-approved volunteer insurance is required (e.g., Volunteers Insurance Service through the *CIMA Companies, Inc.). * "CIMA" is Spanish for "Summit;" it is a capitalized business name, not an acronym.	(a) Statement on letterhead signed by Contractor's authorized official. (See Addendum below for content) (a) Provides excess volunteer liability insurance up to \$1,000,000 per occurrence for all registered volunteers in an organization. (See Appendix L of this manual, or visit www.cimaworld.com for additional information)				
2. General Liability Insurance (G.L.)	A. Contractor <u>is not</u> recognized by the County as a state-approved self-insured entity,	(1) G.L. or a County-approved alternative is required. The *SPARTA Insurance Program is a low-cost, County-approved alternative <i>developed specifically for small contractors</i> unable to afford general liability insurance. *"SPARTA" is the acronym for "Service Providers & Artisan Tradesman Activities."	(a) \$1,000,000 – Combined Single Limit (b) \$3,000,000 – General Aggregate (c) Additional Insured Endorsement (d) Waiver of Subrogation (e) "Hired" and "Non-owned" Auto Endorsement - required if item 3C below applies. (For alternative coverage, see Appendix K of this manual, or visit www.2sparta.com for additional information)				
3. Auto Liability Insurance (A.L.)	A. Contractor owns one or more vehicles	(1) A.L. coverage is required.	<u>Client Transportation Services Provided by Contractor?</u> <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;"><u>If No</u></td> <td style="text-align: center;"><u>If Yes</u></td> </tr> <tr> <td style="text-align: center;">(a) \$1,000,000 per Occurr.</td> <td style="text-align: center;">(b) \$2,000,000 per Occurr.</td> </tr> </table>	<u>If No</u>	<u>If Yes</u>	(a) \$1,000,000 per Occurr.	(b) \$2,000,000 per Occurr.
	<u>If No</u>	<u>If Yes</u>					
(a) \$1,000,000 per Occurr.	(b) \$2,000,000 per Occurr.						
B. Contractor <u>does not</u> own any vehicles BUT employees OR volunteers only occasionally use their own privately-owned vehicle for a business purpose,	(1) No A.L. policy is required provided Contractor provides Risk Management Div. a signed statement that it <u>does not own</u> any company vehicles.	(a) Statement on letterhead signed by Contractor's authorized official. (See Addendum below for content)					

6. Directors and Officers Insurance (D.&O.)

A. Contractor's board of directors does not make decisions which could cost its investors or others financial loss as a result,

(1) D.&O. coverage is not required.

N/A

B. Contractor's board of directors does make decisions which could cost its investors or others financial loss as a result,

(1) D.&O. coverage is required.

(a) \$1,000,000 per Claim or Occurrence
(b) \$3,000,000 General Aggregate

Addendum
to
Community Development Block Grant Insurance Requirements Table

Workers Compensation Insurance Waiver Request

Section 1B(1)(a) above, Workers Compensation: The following language is suggested by the County Risk Management Division for a service provider to use in a letter to County CDH, asserting it has no employees, as the basis for requesting a waiver from the requirement for Workers Compensation Insurance (approval is entirely at the discretion of Risk Management on a case-by-case basis):

“(Corporate Name), Federal I.D. # _____, represents and confirms that it does not currently have any persons who are defined as an “employee” by the California Labor Code. (Corporate Name) understands that the County Risk Management Division, at its discretion, may rely on this representation to waive the County’s requirement for (Corporate Name) to carry Workers Compensation Insurance, or approve a substitute, for the purpose of entering a contract with the County of San Bernardino.”

Automobile Liability Insurance Exception Request

Sections 3B(1)(a) and 3C(1)(a) above, Auto Liability: The following language is suggested by the County Risk Management Division for a service provider to use in a letter to County CDH, asserting non-ownership of any vehicle(s), as the basis for requesting an exception to the requirement for Automobile Liability Insurance:

“(Corporate Name), Federal I.D. # _____, represents and confirms that it does not and will not, during the term of this agreement, own any vehicles, and will maintain a “Hired” and “Non-owned Auto” endorsement on the required General Liability policy, to satisfy the automobile insurance requirements of this agreement.”