

ACORD'

CERTIFICATE OF LIABILITY INSURANCE

SSCHUELER

DATE (MM/DD/YYYY)

4/15/

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 have ADDITIONAL INSURED provisions or 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).

PRODUCER	CONTACT NAME	
	PHONE (A/C, No, Ext) FAX (A/C, No)	
	ADDRESS	
	INSURER(S) AFFORDING COVERAGE	NAIC#
	INSURER A	
INSURED	INSURER B	
	INSURER C	
	INSURER D	
	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.

	EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.												
INSR LTR		TYPE OF INSURANCE	ADDL INSD	SUBF	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s				
Α	X	COMMERCIAL GENERAL LIABILITY				,	,	EACH OCCURRENCE	\$	1,000,000			
		CLAIMS-MADE X OCCUR	X	X	X	100075684-2	11/15/2020	11/15/2021	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000		
								MED EXP (Any one person)	\$				
								PERSONAL & ADV INJURY	\$	1,000,000			
	GEI	N'L AGGREGATE L MIT APPLES PER:						GENERAL AGGREGATE	\$	2,000,000			
	X	POLICY PRO LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000			
		OTHER:							\$				
В	AUT	OMOBILE LIABILITY									COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
		ANY AUTO				BA040000064733	1/10/2021	1/10/2022	BODILY INJURY (Per person)	\$			
		OWNED X SCHEDULED AUTOS					C		BODILY INJURY (Per accident)	\$			
		HIRED AUTOS ONLY NON-OWNED AUTOS ONLY			· · · · · · · · · · · · · · · · · · ·			PROPERTY DAMAGE (Per accident)	\$				
									\$				
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$				
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$				
		DED RETENTION \$							\$				
С	WOF	RKERS COMPENSATION EMPLOYERS' LIABILITY	EDC' I IADII ITV					X PER OTH- STATUTE ER					
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				FLA008687-03	3/16/2021	3/16/2022	E.L. EACH ACC DENT	\$	1,000,000			
				4				E.L. DISEASE - EA EMPLOYEE	\$	1,000,000			
	DES	s, describe under CR PTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Additional Insured status applies to CAWD - Carmel Area Wastewater District under the Commercial General Liability Policy subject to attached Blanket
Endorsement.

RE: Various locations throughout California

Please attached an endorsement CG20-10 or CG20-13 (preferred) to the COI.

CERTIFICATE HOLDER

CAWD - Carmel Area Wastewater District 3945 Rio Rd. Carmel, CA 93922 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



CANCELLATION