

Certificate(s) of Insurance

What is it?

1. Proof of coverage supplied by the 3rd party's insurance broker. It's either displayed to show proof or an attempt to comply with contractual requirements.

What it does not do

1. Doesn't show you the full terms & conditions of the insurance policies.
2. Confers "no rights upon the certificate holder".
3. Does not affirmatively or negatively amend, extend, or alter the actual insurance policies.

What's on a Certificate of Insurance?

ACORD **CERTIFICATE OF LIABILITY INSURANCE** DATE (MM/DD/YYYY) 03/10/2020

A 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.

B **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: NAME, PHONE (A/C, No, Ext), FAX (A/C, No), EMAIL ADDRESS, INSURER(S) AFFORDING COVERAGE, NAIC #

INSURED: **1** INSURER A: **2**, INSURER B, INSURER C, INSURER D, INSURER E

C 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.

NEW	LT#	TYPE OF INSURANCE	INSR	WTD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
		COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE
		CLAIMS-MADE <input type="checkbox"/> OCCUR <input type="checkbox"/>						DAMAGE TO RENTED PREMISES (EA occurrence) \$ 11
		GEN'L AGGREGATE LIMIT APPLIED PER:						PERSONAL & ADV INJURY \$
		POLICY <input type="checkbox"/> PROJ <input type="checkbox"/> LOC <input type="checkbox"/>						GENERAL AGGREGATE \$
		OTHER:						PRODUCTS - COMP/OP AGG \$
		AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (EA accident) \$
		ANY AUTO						BODILY INJURY (Per person) \$
		OWNED AUTO ONLY <input type="checkbox"/> SCHEDULED AUTO ONLY <input type="checkbox"/>						BODILY INJURY (Per accident) \$
		HIREN AUTO ONLY <input type="checkbox"/> NON-OWNED AUTO ONLY <input type="checkbox"/>						PROPERTY DAMAGE (Per accident) \$
		UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/>						EACH OCCURRENCE \$
		CLAIMS-MADE <input type="checkbox"/>						AGGREGATE \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE <input type="checkbox"/> OTHER <input type="checkbox"/>
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in WA)	Y/N	N/A				E.L. EACH ACCIDENT \$
		If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
								E.L. DISEASE - POLICY LIMIT \$
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)								
14								
CERTIFICATE HOLDER					CANCELLATION D			
15					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 16			

- A. Disclaimer 1
- B. Disclaimer 2
- C. Disclaimer 3
- D. Cancellation Notice

1. Exact name of entity on the contract
2. Exact name of insurer (e.g. Hartford Accident & Indemnity Co.) not the "Group" - not AIG, Chubb, Hartford, Travelers etc.
3. Letter to match insurer in 2
4. Commercial General Liability Coverage
5. "X" Occurrence form
6. "X" if Additional Insured Status applies to certificate holder (you)
7. "X" if subrogation waived
8. Actual policy number - NOT binder number or TBD
9. Effective Date of coverage*
10. Expiration Date of coverage*
11. Policy Limits
12. Complete if coverage required
13. Use if coverage is required which is not noted above
14. May be used to describe event or special terms
15. Your contracting entity's name and address
16. "Authorized" Signature

*Note - if the certificate is being provided as proof of insurance for an event, Eff and Exp dates must encompass setup and teardown

Certificate of Insurance – Disclaimer #1

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1. Informational only
2. Confers no rights to you.
3. Does not change the insurance coverage.
4. Does not constitute a contract between you and the insurer(s) or the broker.

Certificate of Insurance – Disclaimer #2

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).

1. Just because this certificate might indicate you an “Additional Insured” doesn’t mean that you are.
2. Disclaimer essentially begs the Certificate Holder to get copies of the endorsements that give you Additional Insured status.

Certificate of Insurance – Disclaimer #3

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.

1. We certify that the policies listed below have been issued to the Named Insured for the policy period indicated.
2. Although a contract might be the reason you received this certificate, the terms and conditions are actually governed by the policies themselves – not your contract.
3. This is only a basic outline of the coverage – it's subject to all the terms, exclusions and conditions of such policies.
4. Limits shown **may** have been reduced by paid claims.

Next Steps

1. In addition to the certificate of insurance each third party must have a written usage agreement with your organization that provides BOTH contractual indemnification and additional insured protection
2. Be persistent to others about COI's and getting copies of actual endorsements.
3. Establish strong internal protocols – it's not enough simply to get a COI and 'check off' the task.
4. Contact your Sovereign Service Team for assistance in reviewing any certificate you receive