



## CALIFORNIA STATE UNIVERSITY, STANISLAUS

### Insurance Requirements: Vendors and Outside Groups Using Campus Facilities

There are certain insurance requirements mandated by the CSU if an outside vendor or group is coming on campus to use campus facilities for any purpose, or to provide a contracted service. Examples of such events may be, but are not limited to:

A private party	Service providers/repairs	Business gathering
Festivals	Other group event	Other type of facility rental

The requirements are as follows:

A Certificate of Insurance (COI) **and** an additional insured endorsement must be provided with the following coverage limits:

- GENERAL LIABILITY COVERAGE:**
  - Comprehensive **or** Commercial form **minimum limits** (higher limits may be required due to the nature of the event or the number of people in attendance) on an occurrence basis:
    - Each Occurrence \$2,000,000
    - General Aggregate \$4,000,000
    - Products/Completed Operations Aggregate \$2,000,000
- ABUSE AND MOLESTATION** (only applicable if youth is present): If applicable, COI must show evidence written on an "occurrence" basis, with a limit no less than \$2,000,000 per occurrence.
- EMPLOYER LIABILITY:** (Commercial Entities) \$1,000,000
- BUSINESS AUTOMOBILE LIABILITY:** If applicable (using non-state vehicles at the event), COI must show evidence of minimum limits for Owned, Scheduled, Non-Owned, or Hired Automobiles with a combined single limit of not less than \$1,000,000.
- WORKERS' COMPENSATION:** If applicable, the COI must show evidence as required under California State Law with Employer's Liability \$1,000,000.
- RATING:** Coverage must be placed with an insurance company with an AM Best rating of A VII or equivalent unless otherwise agreed to by the University.
- DESCRIPTION OF OPERATIONS:** The COI must show specific information as to the date(s) and event for which it's being issued.
- ADDITIONAL INSURED ENDORSEMENT FORM:** Accompanying the COI must be a separate endorsement to the policy naming: **the State of California, the Trustees of the California State University, the California State University Stanislaus, and their auxiliaries, officers, employees, volunteers, representatives and agents** of each of them as additional insureds, except for professional liability and workers' compensation insurance. The endorsement must show the policy number stated on the COI.
- CANCELLATION:** Be in compliance with the latest revised *Acord* form standard cancellation language "*Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions.*"
- DEADLINE:** We request this information to be received by the Office of Safety & Risk Management at least **two weeks prior to the event.**

*These requirements are made pursuant to the California State University Office of the Chancellor Executive Order No. 849, No. 1051, and Technical Letter RM 2012-01. Inquiries should be directed to the University Risk Manager at (209) 667-3114.*



# Sample Endorsement

[1] POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY  
CG 20 26 07 04

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION**

[2] This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### **SCHEDULE**

[3] **Name Of Additional Insured Person(s) Or Organization(s)**

The State of California, the Trustees of the California State University, the California State University Stanislaus, and their auxiliaries, officers, employees, volunteers, representatives and agents

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.

### **Legend**

[1] **Policy Number** corresponds with number on Certificate of Insurance

[2] Statement that the **Endorsement** modifies Certificate of Insurance provided

[3] Names **the State of California, the Trustees of the California State University, the California State University Stanislaus, and the auxiliaries, officers, employees, volunteers, representatives and agents** as additional insureds, except for professional liability and workers' compensation insurance.