

Lennox School District requires all contractors and vendors to indemnify the school district with minimum coverages as follows:

General Liability - \$1,000,000

General Aggregate - \$1,000,000

Automobile Liability (Any) - \$1,000,000

Workers Compensation - Statutory which means if they have employees (excluding family members), they are required by law to have this coverage

Additional Coverage:

Sexual Abuse/Misconduct/Molestation- Generally used when working with children

Employee Liability - Used to cover the actions of the employees of the contractor or vendors when employee does harm to District.

Professional Liability - Generally reserved for Professional Services (ie. A-E, Designers, Engineering, etc.)

Excess Liability - For additional coverage for specific area.

Umbrella Liability - For additional coverage above and beyond the normal coverage across the board.

Most proof of Insurance are made on the industry standard ACORD 25 (see next page)

What to look for when asking for proof of insurance.

1. The Certificate of Liability Insurance (COI) should be sent directly to you from the insurance broker and **not** the contractor or vendor.
2. Look for the "INSURER(S) AFFORDING COVERAGE" box on the right side.
3. On the Procurement Website go to:
 - a) California Department of Insurance link. Check if the Insurance company is admitted. If not, they cannot do business in California.
4. If the Contractor or Vendor employs any workers, they must have Workers Comp.
5. If the Contractor or Vendor is working with children (under 18) they should have Sexual Misconduct Liability coverage.
6. On larger projects (multi-million dollars) they should have excess liability as well as their deductible.
7. Certificate Holder. This should be written to
Lennox School District, 10319 Firmona Ave., Lennox, CA 90304.
8. Endorsement Additional Insured. This should be written to:
Lennox School District, 10319 Firmona Ave., Lennox, CA 90304.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
9/1/2021

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 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 Pacific United Insurance Services 7851 Mission Center Court Suite 322 San Diego CA 92108	CONTACT NAME: Andrew Miller PHONE (A/C No. Ext): (619) 274-8144 FAX (A/C No.): (619) 274-8143 E-MAIL ADDRESS: admin@pacificunitedins.com
INSURED Great Tutoring Services Inc. 205 S. Grand Ste 271 Los Angeles CA 90012	INSURER(S) AFFORDING COVERAGE INSURER A: Philadelphia Indemnity Insurance Compar INSURER B: Employers Preferred Ins Co INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 21-22 Pkg Master

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR W/O	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY ☒ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PROJECT ☐ LOC OTHER:	X		PHPK2317147	9/15/2021	9/15/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000
A	AUTOMOBILE LIABILITY ☒ ANY AUTO ☒ ALL OWNED AUTOS ☒ HIRED AUTOS ☒ SCHEDULED AUTOS ☒ NON-OWNED AUTOS			PHPK2317147	9/15/2021	9/15/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE DED RETENTION \$	X		PHUB782548	9/15/2021	9/15/2022	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	EIG459415901	9/1/2021	9/1/2022	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Sexual/Physical Abuse or Mol.			PHPK2317147	9/15/2021	9/15/2022	Occ Limit/Aggregate Limit \$1MM/\$3MM
A	Professional Liability			PHPK2317147	9/15/2021	9/15/2022	Each Prof. Incident Limit/Agg Limit \$1MM/\$3MM

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Lennox School District is named as additional insured per the attached endorsement. Excess to follow gl policy form.

CERTIFICATE HOLDER

CANCELLATION

Lennox School District 10319 Firmona Ave Lennox, CA 90304	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 P Mosteller/ANDREW
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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

Name Of Additional Insured Person(s) Or Organization(s):

Lennox School District

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. 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:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

- C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.