

SPECIAL EVENT INSURANCE REQUIREMENTS AND VERIFICATION OF COMPLIANCE

As soon as you begin to plan your event, review your insurance policy exclusions and provide the City's insurance requirements to your broker to determine whether there is coverage for all activities planned **and** insurance documents can be provided to meet the City's requirements (common policy exclusions are shown on page 3). This will help to avoid the most common reasons insurance is not accepted: errors and omissions.

Insurance requirements depend on the risk level of the event. As a general rule, the City of Carlsbad requires a minimum of one million dollars in liability coverage. Events with higher risk levels require additional insurance coverage in the form of higher limits and/or multiple policies if all activities cannot be covered by one policy. Contact the Risk Manager at 760-602-2470 for any questions about the required amount of coverage.

Before final permit approval, you will need to submit a certificate(s) and endorsement(s) for your Commercial General Liability (CGL) Insurance policy that name as Additional Insured, the City of Carlsbad, its officers, employees, volunteers and agents. You may also be required to submit insurance for other public entities (e.g. County, State, NCTD, Caltrans, etc.) impacted by your event. Insurance coverage must be primary, and maintained for the duration of the event including set-up and dismantle dates.

If the required insurance for the event is provided from any entity other than the Applicant, that entity must also appear as a Co-Applicant and provide the same signatures as set forth above.

THE FOLLOWING INSURANCE DOCUMENTS MUST BE SUBMITTED:

Certificate(s) of Insurance

Complete the checklist for each policy required for the event (sample certificate on page 4). This document is a statement of the coverage in place but does not extend coverage or any other rights to the City or any other party.

Endorsement to the Policy

Complete the checklist. This document adds language to the insurance policy that is required by the permit. An example is the requirement to make the City additional insured on the insured's policy.

A model endorsement form and samples of insurance industry standard endorsement forms that are acceptable, as long as they have not been altered with additional wording to limit/restrict coverage, are found on pages 5 to 9.

NOTE: Excerpts from policies are not accepted in lieu of the required endorsement.

SPECIAL EVENT INSURANCE CHECKLIST

This checklist as follows and the attached sample certificate are to be used as a guide. Some insurers use their own forms that may not match the sample exactly.

- (1) INSURED:** The "insured" matches the applicant's name as it appears in the application.
The Applicant is the party responsible for the event. Insurance from an entity other than the event holder is **not** a substitute for coverage for the event. Examples include party planners, caterers, or other vendors who provide event services but may not be responsible for the entire event. Insurance from a vendor(s) who is not the Applicant may be required and provided **in addition to** the insurance for the event.

- (2) GENERAL LIABILITY:** "Occurrence" box is checked.
Additional policies or confirmation of coverage in this policy are required for activities that are commonly excluded from the typical Commercial General Liability (CGL) policy. An example is Liquor Liability insurance, which generally is provided by a separate policy. If alcohol is available for consumption and

money changes hands in any way (e.g., for a donation, for a ticket for a meal, for entry into the event, for the beverage) between the facility user/vendor and attendees, then Liquor Liability insurance is required.

- (2a) LIMITS:** Minimum per occurrence limit (higher may be required depending on event risks):
 - \$1 million per occurrence general liability coverage **OR**
 - \$2 million per occurrence general liability coverage if alcohol is to be served.
- (3) POLICY EFFECTIVE AND EXPIRATION DATES:** Policy is current and date(s) of the event fall within the “policy effective” and “policy expiration” dates.
- (4) EXCESS/UMBRELLA:** Supplements limits of other policies to meet required limits, as necessary.
- (5) OTHER:** Liquor Liability or other coverage required for the permit is shown here, or along with another policy as appropriate. Limits are as high as or higher than required.
- (6) DESCRIPTION OF OPERATIONS:** The name of the event, and date(s) to be held, are shown here. **There is no language here attempting to limit liability.** Coverage is shown for event activities that are commonly excluded from a typical CGL policy or typically outside the scope of coverage for a policy for one specific activity, such as a sport.

Two of the most common exclusions are liquor liability and athletic participants*. On page 3 is a list of many types of events and activities that are typically excluded from CGL policies.

***ATHLETIC PARTICIPANTS**

If there are athletic participants, one of the following is required:

- “Participant legal liability” coverage is shown on the certificate at the required limit of coverage, **or**
- “Liability claims filed by athletic participants are not excluded under the general liability insurance” appears in the description section of the certificate.

Note:

- Participant legal liability coverage subject to signing of waiver/release in not acceptable.
- The medical expense portion of a CGL policy and a Workers’ Comp policy are not accepted in lieu of the above.

- Copy of blank waivers and releases of liability forms for athletic participants attached (*release of the City of Carlsbad from liability must be included on the form*)
- Copies of waivers and releases of liability forms signed by all athletic participants

- (7) CERTIFICATE HOLDER:** City of Carlsbad
1200 Carlsbad Village Drive
Carlsbad, CA, 92008
Attn: Special Events

ENDORSEMENT CHECKLIST

A model endorsement form as well as samples of acceptable insurance industry standard (ISO) forms are attached. Complete the checklist for each endorsement required for the event (multiple policies may be needed to cover all event activities).

The endorsement(s) requirements include the following:

- The City of Carlsbad, its officers, employees, volunteers and agents are additional insured. **LIMITED RESTRICTIVE WORDING** is acceptable, other than to restrict the coverage to liability arising out of the operations of the named insured. Sample acceptable industry standard forms are attached and include: **Newer forms: CG 20 10 04 13, CG 20 13 04 13, and CG 20 26 04 13. Older forms which are still acceptable, but seldom used: CG 20 10 11 85, CG 20 26 11 85, CG 20 10 10 93, CG 20 10 03 97, CG 20 10**

10 01, CG 20 24 11 85, CG 29 35 11 88, CG 20 11 01 96, CG 20 12 07 98, and CG 20 26 07 04. Added wording to restrict coverage will not be accepted.

If the event is held on property belonging to another entity, they must also be named additional insured by the same requirements.

- General Liability policy number on endorsement matches policy number on certificate.

COMMON EXCLUSIONS TO GENERAL LIABILITY POLICIES (SPECIAL ASPECTS)

Some events and activities that may be **EXCLUDED** from many general liability insurance policies are shown below. This is not an exhaustive list and some policies may provide coverage where others do not. Event holders should check their policy to ensure coverage for all activities proposed and evidence of this coverage must be provided.

- Aircraft/aviation, all terrain boarding, animals or animal acts, athletic activities/participants, athletic equipment--sale/manufacture or distribution
- Ballooning, hot air balloons, or balloon rides, base jumping, bicycle or unicycle activities, boating, power boats, power boat racing, bouldering, boxing, bungee jumping
- Canoeing, carnival rides, cheerleading pyramids, chemicals, use or demonstration, circus acts, circuses, climbing wall, concert or dance with mosh pits, concerts over six hours, construction or demolition work
- Demolition work, diving, platform diving or spring board diving
- Equestrian related sports
- Fire (use or demonstration with), fireworks, football (except passing camps w/ no contact drills)
- Gliders, guns (use or demonstration with), gymnastics
- Hang gliding, hockey, horseback riding or use of horses, hot air balloons
- Ice hockey, inflatables, inflatable activities, Knockerball, Bubble Soccer
- Jousting
- Karate or contact martial arts, kayaking
- Lacrosse, luge
- Liquor Liability
- Mechanical amusement rides or services, medical or chiropractic care, motorized sporting equipment, mountain biking, mountain climbing, mountain boarding
- Parachuting, polo, professional sporting activities, games, racing or contests of a professional nature and with cash prize, pyrotechnics, fireworks, explosives, black powder
- Rafting, rap, heavy metal or rock concerts, raves, rock climbing, rodeo or roping events (including practice), roller blade or roller skate activities, roller hockey, ropes courses, rugby
- Saddle animal exposure, scaffolding or elevated platform, such as a stage, more than 4 feet above level, scuba diving, skate board activities, skin diving, sky diving, snowboarding, snow skiing, squash
- Tanning devices, tobogganing, tournaments, tractor or truck pulls, trampoline
- Water polo, water skiing, watercraft activities or use, waterslides, wrestling

FOR EVENTS WITH MULTIPLE DATES

- For events with multiple dates choose one:
- List all events during the year on the certificate by name and date(s) OR
 - Add a general statement on the certificate that is for the special event in Carlsbad during the policy year OR
 - Issue a certificate and endorsement for each event OR
 - Attach an email to the certificate and endorsement showing a conversation with the broker confirming that the docs are for all special events during the policy year

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

Clear

Save

DATE (MM/DD/YYYY)

PRODUCER	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED 1	INSURER A:	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY 2 <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC		3		EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) 2a \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$ 4				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ DISEASE - POLICY LIMIT \$
		OTHER 5				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

6

CERTIFICATE HOLDER 7	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
	AUTHORIZED REPRESENTATIVE

CHECKLIST

MODEL ENDORSEMENT

- Policy No. must match Certificate.
- Insured's Name, if shown, must match certificate.

POLICY NUMBER: XXXXXXXX COMMERCIAL GENERAL LIABILITY

INSURED: XXXXXX XXXX XXXXXXXX

**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 Person or Organization: **City of Carlsbad, its officers, employees, volunteers, and agents.**

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule as an insured but only with respect to liability arising out of your operations or premises owned by or rented to you.

Copyright, Insurance Services Office, Inc. 1984

- Name of Person or Organization: City of Carlsbad, its officers, employees, volunteers and agents
- Language is not restrictive. For example, "...with respect to liability... caused solely by the named insured..." will not be accepted.

POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY
CG 20 10 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR
CONTRACTORS – SCHEDULED 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)	Location(s) Of Covered Operations
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:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

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 additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

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.

POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY
CG 20 13 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – STATE
OR GOVERNMENTAL AGENCY OR SUBDIVISION
OR POLITICAL SUBDIVISION – PERMITS
OR AUTHORIZATIONS RELATING TO PREMISES**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

State Or Governmental Agency Or Subdivision Or Political Subdivision:
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 any state or governmental agency or subdivision or political subdivision shown in the Schedule, subject to the following additional provision:

This insurance applies only with respect to the following hazards for which the state or governmental agency or subdivision or political subdivision has issued a permit or authorization in connection with premises you own, rent or control and to which this insurance applies:

1. The existence, maintenance, repair, construction, erection or removal of advertising signs, awnings, canopies, cellar entrances, coal holes, driveways, manholes, marquees, hoist away openings, sidewalk vaults, street banners or decorations and similar exposures; or
2. The construction, erection or removal of elevators; or
3. The ownership, maintenance or use of any elevators covered by this insurance.

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.

POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY
CG 20 26 04 13

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):

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.