ATTACHMENT B -- WHOLESALE
INSURANCE REQUIREMENTS AND REQUIRED CERTIFICATES AND ENDORSEMENTS
(SUBMIT WITH WHOLESALE APPLICATION)

Prior to beginning any activity involving the issuance of a Fireworks Permit (Permit) by the City of La Mirada (CITY) and the La Mirada Community Foundation (Foundation), the applicant must produce and maintain, at their own cost and expense for the duration of their Permit, appropriate insurance against claims for injuries to persons and damages to property which may arise from or in connection with the sale of safe and sane fireworks. The types of insurance required and the amounts of coverage are specified below

City and Foundation reserves the right to review any and all the required policies and/or endorsements, but has no obligation to do so. Failure to demand evidence of full compliance with the insurance requirements set forth in this agreement or failure to identify any insurance deficiency shall not relieve the Permittee from, nor be construed or deemed a waiver of, its obligation to maintain the required insurance at all times during the term of the Permit.

INSURANCE:

a) **COMMERCIAL GENERAL LIABILITY (CGL)** Insurance which must be at least as broad as the most current version of the Insurance Services Office (ISO) Commercial General Liability Coverage Form CG 00 01 providing liability coverage arising out of your organizations operations. The CGL policy shall be written on an occurrence form and shall provide coverage for "bodily injury", "property damage", with coverage for premises and operations (including the use of owned and non-owned equipment), products and completed operations and contractual liability (including, without limitation, indemnity obligations under the Permit requirements with limits of liability of not less than the following **per location**:

1. $1,000,000 per occurrence for bodily injury and property damage
2. $2,000,000 general aggregate
3. $2,000,000 aggregate for products and completed operations

b) **COMMERCIAL AUTOMOBILE LIABILITY (CAL)-(Only Required if the Permittee Has Owned Vehicles on Facility)** Insurance which must be as broad as the most current version of Insurance Services Office (ISO) Business Auto Coverage form **CA 00 01** providing liability coverage arising out of the ownership, maintenance or use of automobiles in the course of your organizations operations. The CAL policy shall be written on an occurrence form and shall provide coverage for "All Owned, Hired and Non-Owned automobiles or other licensed vehicles with limits of liability of not less than the following:

1. $1,000,000 per accident for bodily injury and property damage.

c) **WORKERS' COMPENSATIONS (WC) and EMPLOYERS' LIABILITY (EL)** Insurance as required by the state of California, with Statutory Limits, and Employers' Liability Insurance with limit of no less than $1,000,000 per accident for bodily injury or disease.

d) **DEDUCTIBLES/SELF INSURED RETENTIONS (SIR)** Permittee shall be responsible for payment of any deductibles and/or self-insured retentions contained in any insurance policies required herein. Any deductibles and/or self-insured retentions must be declared to on the Certificate of Insurance.

e) **GENERAL STANDARD FOR INSURANCE POLICIES:** All insurance policies must meet the following general standards

1. Insurance is to be placed with duly licensed or approved non-admitted insurers in the State of California
2. Insurers must have an A.M. Best's rating of A- or better and a minimum financial size of VII.

f) **MAINTENANCE OF COVERAGE:** If at any time during the use of a Permit, the Permittee fails to maintain the required insurance in full force and effect, the use of Permit will be discontinued immediately until notice is received by the City and Foundation that required insurance has been restored to full force and effect.

THE FOLLOWING DOCUMENTS MUST BE SUBMITTED WITH WHOLESALE APPLICATION . PRIOR TO THE ISSUANCE OF A PERMIT. ALL APPLICANTS MUST SUBMIT THE FOLLOWING CERTIFICATES AND ENDORSEMENTS :

☐ **CERTIFICATE OF INSURANCE**:

Evidence of the above coverage and policy limits must be on **CERTIFICATE OF LIABILITY INSURANCE FORM** (**ACORD 25** form or similar form) and:

1. The Permittee must be the Named Insured in the "INSURED" section on the insurance certificate.
2. Must check "LOC" box in "General Aggregate Limit Applies Per" section on the insurance certificate.
3. The "DESCRIPTION OF OPERATIONS/LOCATION/ VEHICLE" section of certificate must contain the following: Certificate Holder below is named as additional insured per attached endorsement form *(which must be at least as broad as the most current version of ISO endorsement form **CG 20 26 07 04** or similar endorsement form.)*
4. There must be only one (1) Additional Insured named in the "CERTIFICATE HOLDER" section on the certificate.

☐ **ENDORSEMENTS:**

ADDITIONAL INSURED:

☐ **1. COMMERCIAL GENERAL LIABILITY**

a. Must be at least as broad as the most current version of ISO endorsement form **CG 20 26 07 04** or similar endorsement form.

b. Must name as additional insured – each name on a separate endorsement:
City of La Mirada, its elected or appointed officials, officers, employees, agents and volunteers and La Mirada Community Foundation, its officers, employees, agents and volunteers each on a separate document.

☐ **2. PRIMARY AND NONCONTRIBUTORY – OTHER INSURANCE**

a. Endorsement form **CG 20 01 04 13** or similar endorsement form.

☐ **3. WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (AKA: WAIVER OF SUBROGATION):**

a. For COMMERCIAL GENERAL LIABILITY: Endorsement form **CG 24 04 05 09** or similar is required.

c. For WORKERS COMPENSATION: Endorsement form **WC 00 03 13** or similar is required.

☐ **4. EARLY NOTICE OF CANCELLATION**

a. Endorsement form **CG 02 24 10 93** or similar is required.