



PLEASE OBTAIN A CURRENT CERTIFICATE OF INSURANCE AND PROVIDE TO BLUSKY

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
Current

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 Vendor's Insurance Agent Information Please send this SAMPLE CERTIFICATE to your Agent	CONTACT NAME: Vendor's Insurance Agent Contact Information	
	PHONE (A/C. No. Ext):	FAX (A/C. No):
E-MAIL ADDRESS:		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: (Insurer must have a rating of A- or higher.)		
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y				EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
B	<input checked="" type="checkbox"/> 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		Y				COMBINED SINGLE LIMIT (Ea accident) \$ 500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
C	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			<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
*BluSky must be listed as Additional Insured on General Liability policy.
*Waiver of Subrogation in favor of BluSky must be included for General Liability, Workers Compensation and Automobile Liability policies.

This sample certificate is intended to relay the certificate holder's minimum requirements

CERTIFICATE HOLDER BluSky Restoration Contractors, LLC 2750 Signal Parkway Signal Hill, CA 90755	CANCELLATION 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 Authorized Signature

Insurance Endorsement - On-Going Operations

This additional insured - Ongoing Operations endorsement affords BluSky coverage under the subcontractors insurance policy when a subcontractor causes property damage or bodily injury. Additional insured status ensures BluSky can make a claim against the subcontractors carrier instead of the need for a lawsuit against the subcontractor.

Endorsement Title Additional Insured – Owners, Lessees or Contractors – On-Going Operations Amendatory Endorsement			
Named Insured Subcontractor Company Name, LLC			Endorsement Number 017
Policy Form GAPLESS	Policy Number ENVP000000000	Policy Period 05/01/2020 to 05/01/2021	Enviat Endorsement Number GAP 10 28 6/1/2016
Issued by Certain Underwriters at Lloyd’s, London			Effective Date of Endorsement 05/01/2020

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – ON-GOING OPERATIONS AMENDATORY ENDORSEMENT

Solely with respect to **§I. COVERAGES**, Section **1. COMMERCIAL GENERAL LIABILITY AND POLLUTION LIABILITY** the Policy is amended as follows:

SCHEDULE

Name of Additional Insured Person(s) or Organization(s)
Where required by written insured contract

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

- §III. 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 environmental damage** caused, in whole or in part, by **your work** that is not included in the **products-completed operations hazard**.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

Insurance Endorsement - Completed Operations

An Additional Insured - Completed Operations endorsement affords BluSky coverage under the contractors insurance policy when property damage or bodily injury occurs after the job has been completed (i.e. roof leak causing damage, or roof tile falls and causes bodily injury). Completed Operations status ensures BluSky can make a claim against the subcontractors carrier avoiding the potential need for a lawsuit against the subcontractor.

Endorsement Title Additional Insured – Owners, Lessees or Contractors – Completed Operations Amendatory Endorsement			
Named Insured Subcontractor Company Name, LLC			Endorsement Number 022
Policy Form GAPLESS	Policy Number ENVP000000000	Policy Period 05/01/2020 to 05/01/2021	Enviant Endorsement Number GAP 10 04 6/1/2016
Issued by Certain Underwriters at Lloyd’s, London			Effective Date of Endorsement 05/01/2020

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS AMENDATORY ENDORSEMENT

Solely with respect to **§I. COVERAGES**, Section 1. **COMMERCIAL GENERAL LIABILITY AND POLLUTION LIABILITY** the Policy is amended as follows:

SCHEDULE

Name of Additional Insured Person(s) or Organization(s)	Location and Description of Completed Operations
Where required by written contract	All locations

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

- §III. 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 environmental damage** caused, in whole or in part, by **your work** at the location designated and described in the schedule of this endorsement performed for that additional insured and that is included in the **products-completed operations hazard**.
- Notwithstanding **§VI. CONDITIONS**, Paragraph **I. Other Insurance**, with respect to the insurance afforded to the additional insureds added by this Endorsement, this Policy shall be primary to, and non-contributory with, any other insurance available to that person or organization when required by written contract.

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.