LICENSEE shall provide public liability insurance from a carrier with an AM Best rating of A or better and a financial rating of seven (7) or better, in an amount not less than $1,000,000, for injuries, including accidental death, to any one person, and subject to the same minimum for each person, in an amount not less than $1,000,000 per occurrence, and $2,000,000 general aggregate, and property damage insurance in an amount not less than $500,000; business automobile liability minimum limits for owned, scheduled, non-owned, or hired automobiles with a combined single limit of not less than $1,000,000 per occurrence; workers’ compensation as required under California State Law with Employer’s Liability $1,000,000. LICENSEE shall require and verify that all agents, co-sponsors, subcontractors and/or vendors associated with this license agreement maintain insurance meeting all the requirements stated herein, and LICENSEE shall ensure that the University is an additional insured on insurance certificates required from agents, co-sponsors, subcontractors and/or vendors.

LICENSEE shall furnish the University a certificate and endorsement of insurance prior to the commencement of the lease and/or agreement. The certificate and endorsement will include the following as additional insured:

*That the State of California, the Trustees of the California State University, the University and the employees, officers, and agents of each of them are included as additional insured.*

*The State, the Trustees, and the University, and the employees, officers, and agents of each of them will not be responsible for any premiums or assessments on the policy.*

LICENSEE agrees that the insurance herein provided for shall be in effect at all times during the term of this lease. In the event said insurance coverage expires at any time or times during the term of this lease, LICENSEE agrees to provide STATE at least thirty (30) days prior to said expiration date, a new certificate of insurance evidencing insurance coverage as provided for herein for not less than the remainder of the term of the lease or for a period of not less than one (1) year. In the event LICENSEE fails to keep in effect at all times insurance coverage as herein provided, STATE may, in addition to any other remedies it may have, terminate this License upon the occurrence of such event.

Attached are sample certificate and endorsement.
CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFER 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
Insurance Agent or Broker with address

CONTACT NAME: First and Last Name
PHONE (A/C No. Ext.): Phone Number
FAX (A/C No.): Fax Number
EMAIL ADDRESS: Email Address

INurers Affording Coverage
INSURER A:
Insurance Company
NAIC #
INSURER B:
Insurers C:
INSURER D:
INSURER E:
INSURER F:

INSURED
Name of Contracting Party with address

COVERAGES

CERTIFICATE 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.

RISK LB TYPE OF INSURANCE ADD'L SUBREACTIONS POLICY NUMBER POLICY DATE POLICY DURATION LIMITS

GENERAL LIABILITY
X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE
X OCCUR

GENL. AGGREGATE LIMIT APPLIES PER:

POLICY
PROJECT
LOC

AUTOMOBILE LIABILITY

X ANY AUTO
ALL OWNED AUTOS
SCHEDULED AUTOS
NON-OWNED AUTOS
HIRED AUTOS

UMBRELLA LIABILITY

EXCESS LIABILITY

DED RETENTION

WORKERS COMPENSATION
EMPLOYERS' LIABILITY
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/OWNER EXCLUDED?
(Mandatory in NM)

DESCRIPTION OF OPERATIONS LOCATIONS VEHICLES:

That the State of California, the Trustees of the California State University, the University and the employees, officers, and agents of each of them are included as additional insured. The State, the Trustees, and the University, and the employees, officers, and agents of each of them will not be responsible for any premiums or assessments on the policy.

CERTIFICATE HOLDER
California State Polytechnic University, Pomona
3801 W Temple Ave.
Pomona CA 91768

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
Signature

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ADDITIONAL INSURED DESIGNATED PERSON OR ORGANIZATION FOR SPECIFIC ACTIVITY - PRIMARY

Additional Insured Person(s) or Organization(s):
That the State of California, the Trustees of the California State University, the University and the employees, officers, and agents of each of them are included as additional insured. The State, the Trustees, and the University, and the employees, officers, and agents of each of them will not be responsible for any premiums or assessments on the policy.

California State Polytechnic University, Pomona
3801 W Temple Ave.
Pomona, CA 91768

The General Liability Additional Provisions Form is amended to add the following:

The Whole An Insured paragraph is amended to include as an insured the person(s) or organization(s) as shown above, but only with respect to "bodily injury," "property damage," "personal injury," and "advertising injury" liability arising solely out of the operations of the Named Insured that are directly related to the activity shown above and only for the dates shown above.

Subject to paragraph one above, the insurance provided by this endorsement is primary to any applicable insurance issued specifically to the person(s) or organization(s) identified above and no insurance of the person(s) or organization(s) listed above shall be called on to contribute to a loss, notwithstanding any provision to the contrary in the General Liability Coverage Form.

The insurance afforded by this endorsement shall not be canceled except after * days prior written notice has been given to the insured organization listed above.