

TCSG Certificate of Insurance SAMPLE

INSTRUCTIONS TO PRODUCING AGENT: Complete the shaded portions of this certificate and return to the Insured. No condition, term, qualification, limitation, exception, exemption, modification, or proviso shall appear on the certificate.

Name, Address and Telephone Number of Producing Agent

PROJECT NUMBER: ES-RFQ-41500-1667

**PROJECT NAME: AGENCY CONTRACT
COURIER SERVICES**

Name and Address of Insured Contractor

Certificate Holder (Owner)

SAVANNAH TECHNICAL COLLEGE
5717 WHITE BLUFF ROAD
SAVANNAH, GA 31405

Type of Insurance	Policy No.	Company Affording Coverage	Policy Expiration Date (MM/DD/YY)	Limits
Commercial General Liability(1993 ISO Occurrence Form or its equivalent); Includes XCU Coverage				General Aggregate (Per Project) \$2,000,000.00 Products-Co./Op Agg \$1,000,000.00 Personal & Adv injury \$1,000,000.00 Contractual \$1,000,000.00 Each Occurrence \$1,000,000.00
Commercial Business Automobile Liability Including, but not limited to, owned, hired and non-owned autos				Combined Single Limit \$1,000,000.00 OR Bodily Injury (per person) \$1,000,000.00 Property Damage \$1,000,000.00
Workers Compensation				W C Statutory Limits
Employers <input type="checkbox"/> Liability				Each Accident \$1,000,000.00 Disease – Policy Limit \$1,000,000.00 Disease Each Employee \$1,000,000.00
Commercial Umbrella Liability				Each Occurrence \$2,000,000.00 Aggregate \$2,000,000.00
Builders Risk written on 1991 Cause of Loss-Special Form or its equivalent(See endorsement below) OR Installation Floater (for other than new construction) in the amount of the contract				

Such insurance as is herein certified (i) applies to all insurance issues in connection with the work required by the provisions of the documents forming the contract, (ii) applies whether or not the contract documents between the insured contractor and the Owner have been executed, (iii) is written in accordance with the company's regular policies and endorsements, subject to the company's applicable manuals or rules and rates in effect, as modified by this certificate and the insurance article of the contract, (iv) have been issued to the insured named above, and (v) are in force at this time.

The Officers, Members, & Employees of the Owner and the State of Georgia are included as additional insureds as their interests may appear. Each Insurer is hereby notified that the statutory requirement that the Attorney General of Georgia shall represent and defend the Indemnities remains in full force and effect and is not waived by issuance of any policy of insurance.

The Builders Risk policy has been endorsed as follows: The following may occur without diminishing, changing, altering or otherwise affecting the coverage and protection afforded the insured under this policy: (i) Furniture and equipment may be delivered to the insured premises and installed in place ready for use; and (ii) Partial or complete occupancy by Owner; and (iii) Performance of work in connection with construction operations insured by the Owner, by agents or lessees or other contractors of Owner, or by contractors or the lessee of the Owner.

Each policy has been endorsed to provide that the policy shall not be canceled, changed, allowed to lapse, or allowed to expire until forty-five (45) days after Owner has received written notice thereof as evidenced by return receipt of registered letter.

Authorized Representative: _____ Date: _____

Type Name: _____