

Memo

To: Library sites participating in the California State Library Broadband Services Project

From: Imperial County Office of Education

Date: March 20, 2024

Re: ICOE Insurance terms and conditions

Purpose

Imperial County Office of Education (ICOE) has contracted with the Corporation for Education Network Initiative in California ("CENIC") to provide high-speed networking to libraries in CA. In the execution of individual contracts questions have surfaced with respect to the insurance to be provided by ICOE.

In an effort to streamline the process and provide proof of insurance, ICOE will provide the following as part of the agreement.

- 1. General Liability insurance in the amount of \$1M per occurrence and \$2M in the aggregate, including additional insured coverage for each site.
- 2. Proof of Worker's Compensation coverage as required under California law. ICOE agrees to provide a waiver of subrogation in favor of each site.

ICOE, like most California public entities, is permissibly self-insured and may meet this requirement through a combination of insurance and/or self-insurance.

Language

The following language will appear on the individual site agreements:

- 9. Insurance.
- (a) Each party shall obtain, pay for, and maintain in effect during the life of this Agreement a Commercial General Liability insurance policy that includes coverage for Premises Operations, Products/Completed Operations, Contractual, Independent Contractors, Broad Form Property Damage, and Personal Injury; with a minimum combined single limit of not less than \$1,000,000 for Bodily Injury and Property Damage (each occurrence) and a \$2,000,000 aggregate.
- (b) Nothing in this Insurance section shall reduce a party's liabilities or obligations under the Indemnification section of this Agreement.
- (c) The Parties acknowledge that ICOE is permissibly self-insured under California law.
- (d) Upon request, each Party shall provide proof of insurance to the other Party.

- (e) The Library will be named as additional insured with respect to general liability.
- (f) Each party shall obtain, pay for, and maintain in effect during the life of this Agreement workers compensation coverage as required by California Law. This requirement may be met with a combination of insurance and/or self-insurance. A waiver of Subrogation will apply with respect to worker's compensation coverage.

Answers to anticipated questions

- 1. **Does ICOE purchase commercial insurance?** ICOE is a California public entity insured through a Joint Powers Authority. ICOE is permissibly self-insured for worker's compensation.
- 2. **Will ICOE** be performing work on-site? No. ICOE is acting as an internet access aggregator. ICOE will not perform any onsite installation services of equipment or infrastructure. Therefore, coverages applicable to 'contracting' work are not provided.
- 3. **Will ICOE** provide any professional design or consulting work? No. ICOE acts as an internet access aggregator and will not perform professional consulting services.
- 4. Will ICOE utilize any autos in the performance of the work? ICOE does not expect to utilize autos to perform this work as there is no anticipated work on site. Therefore, coverages applicable to 'contracting' work are not provided.

Luis Wong Chief Executive Officer Network Initiatives

DATE 7/1/2024

COVERAGE PROVIDER:

Self-Insured Schools of CA 2000 K Street Bakersfield CA 93301 NAMED COVERED MEMBER DISTRICT:

Imperial County Office of Education 1398 Sperber Rd., Bldg B, 2 FL El Centro CA 92243

THE REFERENCED MEMORANDUM OF COVERAGE(S) ("MOC") AND/OR INSURANCE POLICY(IES) EXTEND INDEMNITY PROTECTION TO THE NAMED COVERED MEMBER IN KEEPING WITH THE TERMS AND CONDITIONS OF THE COVERAGE AGREEMENTS/ POLICIES FOR THE EFFECTIVE COVERAGE DATES AND WITH THE STATED COVERAGE LIMITS, COVERAGE PROVIDED BY MOCS IS EXTENDED PURSUANT TO THE RIGHTS AND LIMITATIONS OF CALIFORNIA GOV'T CODE § 990 & 6500 ET SEQ.

CERTIFICATE NUMBER: BB-23-01 ICOE-14

TYPE OF COVERAGE	COVERAGE AFFORDED	MOC/POLICY NUMBER	EFFECTIVE DATE(S)	EXPIRATION DATE(S)	LIMITS (Each Occurrence)
GENERAL LIABILITY	General Liability* Employment Practices Educators' Legal Liability	SLP 7124 25 DEDUCTIBLE* \$ 5,000	07-01-2024	07-01-2025	\$ 2,000,000
AUTOMOBILE LIABILITY	Automobile Liability (All Owned, Hired, Leased, and Borrowed)**	SAP 7124 25 DEDUCTIBLE \$ \$5,000** ACV COMP/COLL	07-01-2024	07-01-2025	\$ 2,000,000

^{*}Member districts with an ADA of less than 4,000 subject to a liability deductible of \$25,000 for claims/suits resulting from sexual abuse and molestation. Members with an ADA of 4,000 or more subject to a liability deductible of \$50,000 for claims/suits resulting from sexual abuse and molestation.

THIS CERTIFICATE CONFERS NO RIGHT, BENEFIT, OR INTEREST IN THE REFERENCED MEMORANDUM(S) OF COVERAGE OR INSURANCE POLICY(IES), NOR DOES IT AMEND, MODIFY, ENLARGE OR ALTER THE COVERAGE AFFORDED BY SUCH DOCUMENTS. IF THE CERTIFICATE HOLDER IS CONTRACTUALLY ENTITLED TO BE NAMED AS AN ADDITIONAL COVERED MEMBER ("ACM") UNDER ANY COVERAGE AGREEMENT OR POLICY, THE CONTRACT IMPOSING THE OBLIGATION MUST BE PROVIDED TO THE NAMED COVERED MEMBER LISTED ABOVE FOR REVIEW AND APPROVAL BEFORE SUCH AN ENDORSEMENT WILL BE ISSUED; ACM COVERAGE IS NOT AUTOMATICALLY GRANTED.

Description and Date(s) of Event/Operations/Locations/Vehicle (Additional remarks/schedule may be attached if more space is needed)

Agreement Between Humboldt County Library and The Imperial County Office of Education For The Provision, Installation, And Maintenance of Advanced Network (Data) Services – Dated March 12, 2024 – Term: March 12, 2024 to January 31, 2026. Humboldt County Library is listed as Additional Insured with respect to General Liability and Auto Liability if required or agreed to in a written contract subject to all provisions and limitations of the policy.

CERTIFICATE HOLDER:

Cancellation of Coverage: If any of the policies described herein be cancelled before their expiration dates, notice will be delivered in accordance with policy provisions.

Issuer of this Certificate:

SELF-INSURED SCHOOLS OF CA 2000 K STREET BAKERSFIELD CA 93301 PHONE (661) 636-4495 FAX (661) 636-4868

E-mail Address: sisc_pl@siscschools.org

Humboldt County Library 1313 THIRD ST EUREKA ST CA 95501

motort g. Kretzones

^{**}Collision/Comp deductible for buses is in the amount of \$5,000. Collision/Comp deductible for other vehicles is in the amount of \$2,500.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/10/2024

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 have ADDITIONAL INSURED provisions or 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).

	SUBROGATION IS WAIVED, Subject his certificate does not confer rights t							require an endorsement. A st	atement on			
PRODUCER						CONTACT NAME: Denise Garcia Gibson						
Smith-Kandal Insurance Agency, LLC 510 W. Main Street Brawley CA 92227					PHONE (A/C, No, Ext): 760-344-2212 FAX (A/C, No): 760-344-3383							
					E-MAIL ADDRESS: denise@smithkandal.com							
						INSURER(S) AFFORDING COVERAGE						
				License#: 6009491					NAIC# 18023			
INSURED IMPECNT-01						INSURER B:						
Imperial County Office of Education						INSURER C:						
1398 Sperber Road El Centro CA 92243						INSURER D:						
					INSURE							
					INSURER F:							
CO	VERAGES CER	TIFIC	CATE	NUMBER: 764882776	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				
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE \$				
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence) \$				
								MED EXP (Any one person) \$				
								PERSONAL & ADV INJURY \$				
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE \$				
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG \$				
	OTHER:							COMBINED SINGLE LIMIT &				
	ANY AUTO							(Ea accident)				
	ANY AUTO OWNED SCHEDULED							BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$				
	AUTOS ONLY AUTOS NON-OWNED							BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$				
	AUTOS ONLY AUTOS ONLY							(Per accident) \$				
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE \$				
	EXCESS LIAB CLAIMS-MADE							AGGREGATE \$				
	DED RETENTION\$							\$				
Α	WORKERS COMPENSATION	Y	Υ	WCE-0990920-24	7/1/2024	7/1/2024	7/1/2025	X PER OTH-ER				
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							E.L. EACH ACCIDENT \$				
								E.L. DISEASE - EA EMPLOYEE \$				
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT \$				
DES	PRIPTION OF OPERATIONS // OCATIONS //EUR	E9 //	COPD	101 Additional Pamarks Schodul	e may b	a attached if mar-	e snace is require	94)				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Excess Workers' Compensation and Employers Liability Policy (1) Policy Part One, Workers' Compensation: Statutory (2) Policy Part Two, Employer's Liability: \$1,000,000 Each Occurrence/\$1,000,000 Aggregate Library: Humboldt County Library Waiver of Subrogation applies, endorsement attached.												
CE	RTIFICATE HOLDER				CANCELLATION							
Humboldt County Library 1313 Third Street					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
Eureka St CA 95501					AUTHORIZED REPRESENTATIVE							
					(Gran) not/117							

STAR INSURANCE COMPANY EXCESS WORKERS' COMPENSATION AND EMPLOYER'S LIABILITY POLICY

Waiver of Our Right to Recover From Others Endorsement

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

Blanket

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

Endorsement Number: TBD

Insured: Imperial County Office of Education

Policy Number: WCE-0990920-24 Effective: 7/1/2024

Printed on: 7/10/2024

Form No. 46 93 WC 0807

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