



REMIF
REDWOOD
EMPIRE
MUNICIPAL
INSURANCE
FUND

414 W. Napa St. • 2nd Floor, Suite C • Sonoma, CA 95476 • 707.938.2388 • Fax 707.938.0374

Members: Arcata Cloverdale Cotati Eureka Fort Bragg Fortuna Healdsburg Lakeport

Rohnert Park St. Helena Sebastopol Sonoma Ukiah Willits Windsor

REDWOOD EMPIRE MUNICIPAL INSURANCE FUND
CERTIFICATE OF COVERAGE

Certificate Holder and

The County of Humboldt, its officers, agents, employees and volunteers

Additional Covered Party:

Attn: Risk Management
 825 Fifth Street, Room 131
 Eureka, CA 95501

This certifies that the coverage described herein has been issued to:

City of Eureka

Description of Activity:

The City is receiving a \$225,000 grant fund to implement and expand a homeless resource program (Uplift) that includes a homeless work program

Date(s) of Activity:

07-01-2019 to 06-30-2021

Location of Activity:

Sonoma County, CA

Entity Providing Coverage	Excess Coverage	Certificate Expiration Date
Safety National	Statutory xs \$1,000,000 SIR	07-01-2021

The following coverage is in effect and is provided through participation in a risk sharing joint powers authority: workers compensation as defined in Memorandum of Coverage are on file with the entity and which will be made available upon request.

The coverage being provided is limited to the activity and the time period indicated herein and a waiver of subrogation. The coverage is subject to all the terms, conditions and exclusions of the Memorandum of Coverage of the Redwood Empire Municipal Insurance Fund.

The certificate holder named herein is only an additional covered party for covered claims arising out of the activity described herein and is subject to the limits stated herein.

Coverage is in effect at this time and will not be cancelled, limited or allowed to expire at a date other than that indicated herein except upon 30 days written notice to the certificate holder.

7/22/19

DATE

Amy Northam, General Manager



CALIFORNIA JOINT POWERS RISK MANAGEMENT AUTHORITY

Accredited with Excellence from the California Association of Joint Powers Authorities

CERTIFICATE OF COVERAGE

Certificate Holder and

Additional Covered Party:

County of Humboldt and its agents, officers, employees and volunteers.
825 Fifth St., Room 131
Eureka, CA 95501
Attn: Risk Management

This certifies that the coverage

Described herein has been issued to: City of Eureka

Description of Activity: Professional service agreement between County of Humboldt and City of Eureka for Homeless Emergency Aid Program (HEAP). The City is receiving a \$225,000 grant to fund, implement and expand a homeless resource program (Uplift) and it includes a work program.

Date(s) of Activity: 07-01-2019 to 06-30-2021

Location of Activity: various locations Eureka, CA 95501

Entity Providing Coverage	Excess Coverage	Certificate Expiration Date
California Joint Powers Risk Management Authority	\$1,500,000 excess of \$ 500,000	June 30, 2020

The following coverage is in effect and is provided through participation in a risk sharing joint powers authority: general liability and automobile liability pooled self-insurance, as defined in the Memorandum of Coverage on file with the entity and which will be made available upon request.

The coverage being provided is limited to the activity and the time period indicated herein and is subject to all the terms, conditions and exclusions of the Memorandum of Coverage of the California Joint Powers Risk Management Authority.

Pursuant to Section II, subsection 8, relating to the definition of a covered party, the certificate holder named herein is only an additional covered party for covered claims arising out of the activity described herein and is subject to the limits stated herein.

Coverage is in effect at this time and will not be cancelled, limited or allowed to expire at a date other than that indicated herein except upon 30 days written notice to the certificate holder.

07-22-2019

Date

Authorized Signature

Tony Giles, CPCU, ARM-P, General Manager

Name and Title (Print or type)

Certificate Number: *FORM140681*

Form C