

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/19/2020

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 SUE	BROGATION IS WAIVED, subject ertificate does not confer rights to	to the	e ter	ms and conditions of th	e polic	y, certain po dorsement(s)	olicies may r	equire an endorsement.	A sta	itement on	
PRODUCE		tile	CCITA	neate notaer in nea or or	CONTA	Theresa La	aidlaw				
Pauli-Shaw Insurance Agency						NAME: THEFES Latiday PHONE (A/C, No. Ext): 707-822-7251 (A/C, No.): 707-826-9021					
627 7th					(AO, 110, EA).						
Arcata	CA 95521				E-MAIL ADDRESS: theresa@pauli-shaw.com INSURER(S) AFFORDING COVERAGE NAIC #						
					INSURER(S) AFFORDING COVERAGE INSURER A : Nonprofits Insurance Alliance				NAIC#		
				4504H0H04	INSURE	RA: Nonprofit	ts Insurance	Alliance			
INSURED	Haves Destroyahin Inc			ARCAHOU-01	INSURER B :						
Arcata House Partnership, Inc. Kate Newby						INSURER C:					
1005 - 11th Street						INSURER D :					
Arcata CA 95521					INSURER E :						
					INSURER F:						
COVER	RAGES CER	TIFIC	ATE	NUMBER: 809474966				REVISION NUMBER:			
INDICA CERTI EXCLU	IS TO CERTIFY THAT THE POLICIES ATED. NOTWITHSTANDING ANY REIFICATE MAY BE ISSUED OR MAY INSIGNS AND CONDITIONS OF SUCH	QUIR PERTA POLIC	AIN.	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF AN	Y CONTRACT THE POLICIE: REDUCED BY I	OR OTHER I S DESCRIBEI PAID CLAIMS.	DOCUMENT WITH RESPECT TO) ALL 7	WHICH THIS	
INSR LTR	TYPE OF INSURANCE	INSD		POLICY NUMBER			POLICY EXP (MM/DD/YYYY)	LIMITS			
A X	CLAIMS-MADE X OCCUR	Y		2020-08081		2/15/2020	2/15/2021	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000		
	SEATING-WINDE 11 COOCH							MED EXP (Any one person)	\$ 20,00	0	
-								PERSONAL & ADV INJURY	\$ 1,000	.000	
-								GENERAL AGGREGATE	\$ 3,000		
X	N'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMP/OP AGG	\$3,000		
^	POLICY JECT LOC							PRODUCTO COMITOT ACC	\$,000	
—	OTHER:		-	2020 08084		2/15/2020	2/15/2021	COMBINED SINGLE LIMIT	\$ 1,000	.000	
	TOMOBILE LIABILITY			2020-08081		2/15/2020	2/15/2021	(Ea accident) BODILY INJURY (Per person)	\$		
X	ANY AUTO OWNED SCHEDULED							BODILY INJURY (Per accident)	s		
	AUTOS ONLY AUTOS							PROPERTY DAMAGE	\$		
X	HIRED X NON-OWNED AUTOS ONLY							(Per accident)			
									\$		
A X	UMBRELLA LIAB X OCCUR			2020-08081-UMB		2/15/2020	2/15/2021	EACH OCCURRENCE	\$ 2,000	0,000	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$ 2,000	,000	
	DED X RETENTION\$ 10,000								\$		
	RKERS COMPENSATION							PER OTH- STATUTE ER			
ANY	D EMPLOYERS' LIABILITY YPROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$		
	FICER/MEMBER EXCLUDED?	N/A						E.L. DISEASE - EA EMPLOYEE	\$		
If ve	es, describe under SCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
1000	SOUNT HOLY OF SEED THOUSE SOUN										
								1 P			
DESCRIP	PTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACORI	101. Additional Remarks Sched	ule, may	be attached if mor	re space is requi	red)	-11-11)	
RE: Ca	al Fresh Out Reach Funding.										
When	required by written contract or agree anal Insured	ment	the f	ollowing apply:				FEB 2 0 2020			
Primar	v Wording				FED 20 2020						
When	available, form(s) are attached.										
							PE	RSONNEL DE	PT		
							1 fort	TOOTHILL DE			
CERTI	FICATE HOLDER				CAN	CANCELLATION					
County of Humboldt Bioly Management					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
County of Humboldt, Risk Management Dept of Health & Human Services/Social Svc Branch											
825 5th St.						AUTHORIZED REPRESENTATIVE					

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Eureka CA 95501





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PERSONNEL DEPOLICY NUMBER: 2020-08081

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED PRIMARY AND NON-CONTRIBUTORY ENDORSEMENT FOR PUBLIC ENTITIES

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

	SCHEDULE	
Name of Person or Organization:		

A. Section II – WHO IS AN INSURED is amended to include:

- **4.** Any public entity as an additional insured, and the officers, officials, employees, agents and/or volunteers of that public entity, as applicable, who may be named in the Schedule above, when you have agreed in a written contract or written agreement presently in effect or becoming effective during the term of this policy, that such public entity and/or its officers, officials, employees, agents and/or volunteers be added as an additional insured(s) on your policy, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
 - a. Your negligent acts or omissions; or
 - b. The negligent acts or omissions of those acting on your behalf;

in the performance of your ongoing operations.

No such public entity or individual is an additional insured for liability arising out of the sole negligence by that public entity or its designated individuals. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.

- B. Section III LIMITS OF INSURANCE is amended to include:
 - 8. The limits of insurance applicable to the public entity and applicable individuals identified as an additional insured(s) pursuant to Provision A.4. above, are those specified in the written contract between you and that public entity, or the limits available under this policy, whichever are less. These limits are part of and not in addition to the limits of insurance under this policy.
- C. With respect to the insurance provided to the additional insured(s), Condition 4. Other Insurance of SECTION IV – COMMERCIAL GENERAL LIABILITY CONDITIONS is replaced by the following:
 - 4. Other Insurance
 - a. Primary Insurance

This insurance is primary if you have agreed in a written contract or written agreement:

(1) That this insurance be primary. If other insurance is also primary, we will share with all that other insurance as described in **c**. below; or

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(2) The coverage afforded by this insurance is primary and non-contributory with the additional insured(s)' own insurance.

Paragraphs (1) and (2) do not apply to other insurance to which the additional insured(s) has been added as an additional insured or to other insurance described in paragraph **b**. below.

b. Excess Insurance

This insurance is excess over:

- 1. Any of the other insurance, whether primary, excess, contingent or on any other basis:
 - (a) That is Fire, Extended Coverage, Builder's Risk, Installation Risk or similar coverage for "your work":
 - (b) That is fire, lightning, or explosion insurance for premises rented to you or temporarily occupied by you with permission of the owner;
 - (c) That is insurance purchased by you to cover your liability as a tenant for "property damage" to premises temporarily occupied by you with permission of the owner; or
 - (d) If the loss arises out of the maintenance or use of aircraft, "autos" or watercraft to the extent not subject to Exclusion g. of SECTION I – COVERAGE A – BODILY INJURY AND PROPERTY DAMAGE.
 - (e) Any other insurance available to an additional insured(s) under this Endorsement covering liability for damages which are subject to this endorsement and for which the additional insured(s) has been added as an additional insured by that other insurance.
- (1) When this insurance is excess, we will have no duty under Coverages A or B to defend the additional insured(s) against any "suit" if any other insurer has a duty to defend the additional insured(s) against that "suit". If no other insurer defends, we will undertake to do so, but we will be entitled to the additional insured(s)' rights against all those other insurers.
- (2) When this insurance is excess over other insurance, we will pay only our share of the amount of the loss, if any, that exceeds the sum of:
 - (a) The total amount that all such other insurance would pay for the loss in the absence of this insurance; and
 - (b) The total of all deductible and self-insured amounts under all that other insurance.
- (3) We will share the remaining loss, if any, with any other insurance that is not described in this Excess Insurance provision and was not bought specifically to apply in excess of the Limits of Insurance shown in the Declarations of this Coverage Part.

c. Methods of Sharing

If all of the other insurance available to the additional insured(s) permits contribution by equal shares, we will follow this method also. Under this approach each insurer contributes equal amounts until it has paid its applicable limit of insurance or none of the loss remains, whichever comes first.

If any other the other insurance available to the additional insured(s) does not permit contribution by equal shares, we will contribute by limits. Under this method, each insurer's share is based on the ratio of its applicable limit of insurance to the total applicable limits of insurance of all insurers.

POLICY NUMBER: 2020-08081

Named Insured: Arcata House Partnership

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.

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

- A. Section II 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 "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:
 - In the performance of your ongoing operations; or
 - In connection with your premises owned by or rented to you.

However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.