

VENDOR INSURANCE REQUIREMENTS

Evidence of the following insurance coverage must be provided to and approved by California State University Channel Islands (CSUCI) prior to the commencement of services. Please provide a copy of this document to your insurance agent and/or insurer. Certificates of Insurance and Policy Endorsements should be emailed to Risk@csuci.edu.

REQUIRED MINIMUM LIMITS OF INSURANCE*	
General Liability	\$2,000,000 per occurrence, \$4,000,000 aggregate
Business Automobile Liability (owned, scheduled, non-owned and hired)	\$1,000,000 per occurrence
Workers Compensation Insurance	As required by California State Law (\$1,000,000)

CERTIFICATE HOLDER	
The certificate holder shall be:	California State University Channel Islands One University Drive Camarillo, CA 93012

REQUIRED LANGUAGE TO BE PROVIDED ON A SEPARATE POLICY ENDORSEMENT
<p>Certificates of Insurance containing general liability coverage shall be endorsed to contain the following provisions. The wording on the endorsement must be exactly as shown below:</p> <p><i>The State of California, the Trustees of the California State University, CSU Channel Islands, and the officers, employees, representatives, volunteers and agents of each of them are to be included as additional insureds to all required liability coverage.</i></p>

OTHER REQUIREMENTS:

1. Each insurer shall have an A.M. Best rating of at least A:VII
2. Coverage shall not be cancelled, modified, or reduced without thirty (30) days advance written notice to CSUCI.
3. The insurance maintained by CSUCI shall be in excess of the contractor/vendor's insurance and shall not contribute.
4. As insurance policies expire during the term of a contract, the contractor/vendor must submit new certificates of insurance and endorsements in order to continue work.

***Note:** These are minimum levels of insurance. If you are entering into a contract with the University, please refer to the insurance requirements in your contract which may have different limits and categories of insurance required.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE
READ IT CAREFULLY**

**ADDITIONAL INSURED — OWNERS, LESSEES OR
CONTRACTORS (FORM B)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

SCHEDULE

Name of Person or Organization:

*Channel Islands State University, the State of California, the Trustees of the
California State University, the University, employees, officers, and agents of each of
them.*

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of “your work” for that insured by or for you.