



**Resource Recovery Program**  
 PO Box 24055, MS 702  
 Oakland, CA 94623-1055  
 (510) 287-1632  
[RRInsure@EBMUD.com](mailto:RRInsure@EBMUD.com)  
[www.ebmud.com/wastewater/commercial-waste/trucked-waste](http://www.ebmud.com/wastewater/commercial-waste/trucked-waste)

# CERTIFICATE OF COMMERCIAL GENERAL LIABILITY INSURANCE

**THIS IS TO CERTIFY TO:**

East Bay Municipal Utility District (EBMUD)  
 Department: Wastewater Department, Environmental Services Division  
 Street Address: 375 11th Street, MS 702  
 Mailing Address: P.O. Box 24055  
 City, State, Zip: Oakland, CA 94623-1055

**THE FOLLOWING DESCRIBED POLICY HAS BEEN ISSUED TO:**

District Account Number: (Completed by EBMUD)  
 Insured: \_\_\_\_\_  
 Address: \_\_\_\_\_

**LOCATION AND DESCRIPTION OF PROJECT/AGREEMENT:**

Trucked non-hazardous waste permitted for disposal at designated EBMUD Wastewater Treatment facilities

**TYPE OF INSURANCE: Commercial General Liability Coverage/Endorsements as required by agreement.**

**LIMITS OF LIABILITY:** \$2,000,000 Occurrence & Aggregate, Bodily Injury and Property Damage-General Liability  
**(MINIMUM)** \$2,000,000 Occurrence & Aggregate, Personal Injury/Advertising Injury  
 \$2,000,000 Occurrence & Aggregate, Products/Completed Operations

**SELF INSURED RETENTION (\$):** \_\_\_\_\_

**AGGREGATE LIMITS (\$):** \_\_\_\_\_

**INSURANCE COMPANY(IES):** \_\_\_\_\_

**POLICY NUMBER(S):** \_\_\_\_\_

**POLICY TERM:** From: \_\_\_\_\_ To: \_\_\_\_\_

**THE FOLLOWING COVERAGES OR ENDORSEMENTS ARE INCLUDED IN THE POLICY(IES):**

1.  EBMUD, its Directors, Officers and Employees are Additional Insureds in the policy(ies) as to work being performed under this agreement. ENDORSEMENT NO. \_\_\_\_\_
2.  The coverage is Primary and non-contributory to any other applicable insurance carried by EBMUD.
3.  The policy(ies) covers waiver of subrogation by the Carrier(s) against EBMUD and its Directors, officers, agents, and employees.
4.  The policy(ies) covers contractual liability.
5.  The policy(ies) are written on an occurrence basis.
6.  The policy(ies) cover District's Property in Customer's care, custody and control.
7.  The policies cover personal injury (libel, slander, and wrongful entry and eviction) liability.
8.  The policies cover products and completed operations and shall not contain any "prior work" coverage limitation or exclusion applicable to any services performed by Customer or on Customer's behalf.
9.  The insurance requirements including the Additional Insured Endorsements shall be the greater of (1) the minimum coverage and limits specified; or (2) the broader coverage and maximum limits of coverage of any insurance policies or proceeds available to the Named Insured. It is agreed that these insurance requirements shall not in any way act to reduce coverage that is broader or that includes higher limits than the minimums required herein.
10.  Insurance policies and Additional Insured Endorsement(s) shall not exclude liability and damages to work arising out of, pertaining to, or in any way relating to services performed by Subcontractor on Customer's behalf.
11.  A severability of interest provision must apply for all the Additional Insureds.
12.  Independent Contractor's liability shall not limit coverage for liability and/or damages arising out of, pertaining to, or in any way resulting from Services provided under this Agreement.
13.  No coverage required shall be cancelled, non-renewed or materially reduced in coverage or limits without EBMUD being provided at least thirty (30) days prior written notice, other than cancellation for the non-payment of premiums, in which event EBMUD shall be provided ten (10) days prior written notice. Replacement of coverage with another policy or insurer, without any lapse in coverage or any reduction of the stated requirements does not require notice beyond submission to EBMUD of an updated certificate of insurance.



**Resource Recovery Program**  
PO Box 24055, MS 702  
Oakland, CA 94623-1055  
(510) 287-1632  
[RRInsure@EBMUD.com](mailto:RRInsure@EBMUD.com)  
[www.ebmud.com/wastewater/commercial-waste/trucked-waste](http://www.ebmud.com/wastewater/commercial-waste/trucked-waste)

# CERTIFICATE OF COMMERCIAL GENERAL LIABILITY INSURANCE

**IT IS HEREBY CERTIFIED that the above policies provide liability insurance as required by the agreement between the East Bay Municipal Utility District and the insured.**

Firm	_____	Signed	_____
Address	_____	Date	_____
	_____	Phone	_____
		Email	_____

"This certificate or verification of insurance is not an insurance policy and does not amend, extend, or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate or verification of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of the policies."