

**San Francisco State University
Procurement Department
1600 Holloway Avenue, Corp Yd 140
San Francisco, CA 94132-4033
larrylee@sfsu.edu
PH: 415-338-1833**

Re: Request for Certificate of Insurance and Additional Insured Endorsement

PLEASE READ THIS LETTER CAREFULLY. YOU WILL NOT BE AUTHORIZED TO PROCEED WITH SERVICE AND NO PAYMENT FOR SERVICE PERFORMED CAN BE MADE UNLESS THE CSU INSURANCE REQUIREMENTS HAVE BEEN SATISFIED.

The California State University requires that all vendors who provide services on its campuses maintain adequate general liability, auto liability, professional liability (when applicable) and Worker's Compensation insurance. San Francisco State University is requesting your firm submit a certificate of insurance as evidence of coverage in compliance with CSU Requirements.

The limits of liability required are as follows*:

General Liability:	\$1,000,000 per occurrence/\$2,000,000 aggregate
Auto Liability:	\$1,000,000
Workers Comp:	As required under California law

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

By executive order of the CSU Chancellor, insurance policies **MUST** be endorsed to include **San Francisco State University, the state of California, the Trustees of the California State University, the University, employees, officers, and agents of each of them**, as additional insured. Please note the bold text and provide this to your agent or carrier. The endorsement **MUST** contain this exact language.

Due to the disclaimer which appears on the back or upper right hand corner of most certificate of insurance forms, SF State requires a separate additional insured endorsement form. The additional insured clause appearing in the description box on the face of the Certificate IS NOT SUFFICIENT.

Please see the attached sample of an acceptable endorsement.

All certificates of insurance provided to the University also require the following:

- A. that the insurer will not cancel the insured's coverage without thirty (30) days prior notice to the University;
- B. that the insurers are licensed by the State of California to transact insurance and shall hold a current A.M. Best's rating of no less than A VII;

Please have your insurance company fax or email a copy the certificate and mail the original to the above address. When mailing, please address to the attention of "Insurance Coordinator".

Sincerely,

**Larry Lee,
SF State Procurement**

POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY

**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:

San Francisco 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.

This is a SAMPLE Document

***** NOTE :** Due to the disclaimer, which appears on the back or upper right hand corner of the original certificate of insurance, our University requires that we obtain an original and separate additional insured