Risk Management Division
P.O. Box 8101
Arvada, CO 80001

Telephone: 720-898-7590
Fax: 720-898-7591

Requirements when filing Acord form Certificates of Insurance

Effective December 1, 2004

Certificates must be received in your insurance agent's business envelope

Improperly issued certificates will not be accepted

ADDITIONAL INSURED	**IMPROPERLY ISSUED CERTIFICATES WILL NOT BE ACCEPTED** **City of Arvada must be shown as an additional insured with regard to:** ❖ General Liability ❖ Products Liability ❖ Automobile Liability ❖ Liquor Liability (if applicable) ***Additional insured forms CG 20-12-07-98 or CG 20-26-07-04 should be used.*** ***Additional insured wording of "The City of Arvada is named as an additional insured with respects to general liability per written agreement." may also be used*** **Copy of additional insured endorsement must be attached to the certificate.**
CANCELLATION PROVISIONS	➢ **THIRTY (30)** days notice of cancellation, except for non-payment of premium
DESCRIPTION OF OPERATIONS	Description of project to which certificate applies. ***If Certificate is for contractor's license, please so indicate.***
COVERAGE, LIMITS AND TERM	Λ Occurrence limit bust be at least $1,000,000 Λ General & Prod/Comp Operations Aggregate must be at least $2,000,000 Λ Liquor Liability *(if applicable)* must be at least $150,000 Λ Evidence of Auto Liability $1,000,000 Λ Evidence of Worker Compensation at least $100,000/$500,000/$100,000 Λ Certificate must be for *current* policy term
SIGNATURE	Certificate must be signed by a *licensed* representative of the carrier(s)
CARRIER	Carrier must be rated B+ or better, according to *Best's Rating Guide*

×××Please send this page to your insurance agent for processing×××

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