

2025 Oceanside Dia de los Muertos Festival

Insurance Requirements for

Food Vendors and Amusement Concessions

The following insurance requirements and language are required for the purpose of conducting Food Services or Amusement Activities within the Friends of Oceanside Dia de los Muertos Festival in the City of Oceanside.

Automobile Liability Insurance: Coverage is required if any vehicles are to be used by event employees during the course of set-up, staging, and load-out at the event.

Workers Compensation Insurance: Coverage is required for all commercial events in which the insured entity has paid employees providing services for the event on the City of Oceanside property.

General Liability: Minimum coverage for food vendors' general liability coverage is \$2,000,000 (Two Million Dollars) aggregate with \$1,000,000 (One Million Dollars) per occurrence. Additional coverage may be required based on the type of event and risk management.

Additional Insured Endorsement: Please be sure your insurance agent adds the following language to your Certificate of Liability Insurance. The following language must be stated in the "Description of Operation/ Location/Special Provisions" section of the insurance certificate as well as the endorsement page:

Friends of Oceanside Dia de los Muertos, The City of Oceanside, and all of its parent and subsidiary companies, and their officers, directors, agents, employees and assigns of each as "primary" additional insured with the waiver of subrogation but only insofar as the operations and facilities in the Event Venue area are concerned. A waiver of subrogation is provided in favor of Friends of Oceanside Dia de los Muertos, and The City of Oceanside and all of its parent and subsidiary companies, and their officers, directors, agents, employees, and assigns.

Cancellation Notice: "Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 15 days written notice to the certificate holders named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the insurer, its agents or representatives."

List of Additional Insured:

Friends of Oceanside Dia de los Muertos, PO Box 2300, Oceanside, CA 92051

City of Oceanside Property Department, 300 N. Coast Hwy, Oceanside, CA 92054

SEE SAMPLE CERTIFICATE/FORM ON NEXT PAGE



BEANCOF-01

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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 SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

| | | |
|----------|-----------------------|----------------|
| PRODUCER | CONTACT NAME | |
| | PHONE (INC. NO. EXT.) | FAX (INC. NO.) |
| INSURED | INSURER A | |
| | INSURER B | |
| | INSURER C | |
| | INSURER D | |
| | INSURER E | |

Vendor**COVERAGES**

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INT'L | TYPE OF INSURANCE | ADDITIONAL INSURED | POLICY NUMBER | POLICY EFF. (MM/DD/YYYY) | POLICY EXP. (MM/DD/YYYY) | LIMITS |
|-------|---|--------------------|---------------|--------------------------|--------------------------|---|
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIM-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY UMBRELLA LIA B <input type="checkbox"/> EXCESS LIA B <input type="checkbox"/> DEC <input type="checkbox"/> RETENTION \$ | | | | | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA OCCUR) \$ 1,000,000 MED EXP (EA PERSON) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPOP AGG \$ 2,000,000 COMBINED SINGLE LIMIT (EA OCCUR) \$ BODILY INJURY PERSON \$ BODILY INJURY PERSONS \$ PROPERTY DAMAGE (EA OCCUR) \$ EACH OCCURRENCE \$ AGGREGATE \$ |
| A | WORKERS COMPENSATION AND EMPLOYER LIABILITY ANY PROPRIETOR/OWNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Notatory in NH) <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, describe under DESCRIPTION OF OPERATIONS BELOW | | | | | <input checked="" type="checkbox"/> GEN. STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 |

SAMPLE
Minimum Aggregate
\$2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 104, Additional Remarks Schedule, may be attached if more space is required)

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CERTIFICATE HOLDER**CANCELLATION**

Friends of Oceanside Dia de Los Muertos
 870 Rivertree Drive, Oceanside, CA 92058

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

City of Oceanside
 Property Department
 300 N. Coast Hwy, Oceanside, CA 92054

AUTHORIZED REPRESENTATIVE