

# 2022 Oceanside Dia De Los Muertos

## 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 event 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 the risk assessment.

**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 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  
870 Rivertree Drive, Oceanside, CA 92058

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

SEE SAMPLE 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	CONTRACT NUMBER	
	PHONE (A/C, H/O, E, M)	760 (A/C, H/O)
INSURED  <b>Vendor</b>	INSURER(S) AFFORDING COVERAGE	NAME #
	INSURER P.L.S.	
	INSURER P.L.S.	
	INSURER P.L.S.	
	INSURER P.L.S.	
	INSURER P.L.S.	

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.

INITIAL	TYPE OF INSURANCE	ACORD FORM (REV. DATE)	POLICY EFF. DATE (MM/DD/YY)	POLICY EXP. DATE (MM/DD/YY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LMT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	<b>SAMPLE</b>			EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ 1,000,000 MED EXP (A/C, H/O, E, M) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - CONSUME AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NONOWNED AUTOS ONLY				COMBINED SINGLE LIMIT (EA OCCUR) \$ BODILY INJURY (PERSONAL) \$ BODILY INJURY (PERSONAL) \$ PROPERTY DAMAGE (EA OCCUR) \$
	UMBRELLA LMB <input type="checkbox"/> EXCESS LMB <input type="checkbox"/> CLAIMS MADE  DED    RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$
A	EMPLOYER'S COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR PARTNER/EXECUTIVE OFFICER/OWNER EXCL. LISTED (No industry in III) If yes, describe in III DESCRIPTION OF OPERATIONS: DINK	III			<input checked="" type="checkbox"/> PER 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

DESCRIPTION OF OPERATION(S) / LOCATION(S) / VEHICLE(S) (ACORD 101. Additional Remarks Schedule may be attached if more space is required)  
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 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

<b>CERTIFICATE HOLDER</b> Friends of Oceanside Dia de Los Muertos 870 Rivertree Drive, Oceanside, CA 92058  City of Oceanside Property Department 300 N. Coast Hwy, Oceanside, CA 92054	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE
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