



## Subcontractors Insurance Policy

### **General Liability insurance in the following amounts:**

General Aggregate	\$2,000,000
Products & Completed Operations Aggregate	\$2,000,000
Personal and Advertising Injury	\$1,000,000
Blanket Contractual Liability- Written and Oral	\$1,000,000
Fire Legal Liability	\$100,000
Each Occurrence	\$1,000,000

The policy shall include bodily injury, property damage, personal injury and broad form contractual liability coverage.

The policy shall be endorsed to include: 1) the following additional insured language: "Gruber Companies, its managing agent, and their respective officers, directors, shareholders, members, parent subsidiaries, related and affiliated entities and employees shall be named as additional insured with respect to liability arising out of the activities performed by or on behalf of Gruber Companies"; and 2) a waiver of subrogation against Gruber Companies, its managing agent, and their respective officers, directors, shareholders, members, parent subsidiaries, related and affiliated entities and employees for losses arising from work performed on behalf of Gruber Companies.

### **Automobile Liability with a Combined Single Limit (as) of \$1,000,000**

**Bodily injury and property damage for any owned, hired and/or non-owned vehicles used in the performance of employment relation with Gruber Companies**The policy shall be endorsed to include: 1) the following additional insured language: "Grubercompanies, its managing agent, and their respective officers, directors, shareholders, members, parent subsidiaries, related and affiliated entities and employees" shall be named as additional insured with respect to liability arising out of the activities performed by or on behalf of Gruber Companies"; and 2) a waiver of subrogation against Gruber Companies, its managing agent, and their respective officers, directors, shareholders, members, parent subsidiaries, related and affiliated entities and employees for losses arising from work performed on behalf of Gruber Companies.

### **Workers' Compensation:**

Workers' Compensation shall provide all statutory Workers' Compensation Insurance coverage required in the states where contract services are to be performed

The policy shall be endorsed to include a waiver of subrogation against Gruber Companies, its managing agent, and their respective officers, directors, shareholders, members, parent subsidiaries, related and affiliated entities and employees for losses arising from work performed as a subcontract on behalf of Gruber Companies

### **Refer to the sample certificate of liability insurance format.**

# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
2/22/2013

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 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  Your agent information	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED  Your name	INSURER A:	
	INSURER B:	
	INSURER C:	A rated carrier or better
	INSURER D:	
	INSURER E:	
	INSURER F:	

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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		SAMPLE			EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS		CERTIFICATE			COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$: . . . . .		CERTIFICATE			EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	CERTIFICATE			<input checked="" type="checkbox"/> WC STATUTORY LIMITS <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

Please show current term effective and expiration dates for all lines

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Gruber Industries, Inc; Gruber Technical, Inc dba: Gruber Power Services is named as a additional insured with respects to General Liability per attached form (list form #) including primary and non-contributory wording. Auto additional insured applies per attached form (list form #). Waiver of Subrogation applies to General Liability per attached form (list form #); Auto per attached form (list form #) and Workers Compensation per attached form (list form).

CERTIFICATE HOLDER  Gruber Industries, Inc; Gruber Technical, Inc dba: Gruber Power Services 21439 N.2nd Avenue Phoenix, AZ 85027	CANCELLATION  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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