

# City of Hartford Maintenance of Insurance Certification



In connection with its CDBG Application for Program Year 49, I \_\_\_\_\_,

FULL NAME

\_\_\_\_\_ of \_\_\_\_\_, as of \_\_\_\_\_

TITLE

ORGANIZATION NAME (APPLICANT)

DATE (MM/DD/YEAR)

on behalf of the Applicant, hereby acknowledges that:

The Applicant understands and agrees that as a condition of receipt of funding applied for in this application, the Applicant shall maintain in force at all times during the contract for funding, and any extension thereof, the following minimum coverages, and shall name the City of Hartford as an Additional Insured on a primary and non-contributory basis to all policies except Workers Compensation.

- **Commercial General Liability Insurance** - insuring against damages to persons and property (including, but not limited to, loss of life), with no exclusion for sexual misconduct, in an amount not less than least One Million Dollars (\$1,000,000.00) for each occurrence and Two Million Dollars (\$2,000,000.00) aggregate with a deductible not exceeding Ten Thousand Dollars (\$10,000.00), which deductible shall be the responsibility of the Applicant;
- **Automobile Liability Insurance** - (including non-owned or hired vehicles) insuring against damages to persons and property (including, but not limited to, loss of life) in an amount not less than a combined single limit of at least One Million Dollars (\$1,000,000.00) for each occurrence with a deductible not exceeding Ten Thousand Dollars (\$10,000.00), which deductible shall be the responsibility of the Applicant;
- **Workers' Compensation Insurance** - covering Applicants and its employees at the Connecticut Statutory limit including Employers' Liability with limits of One Million Dollars (\$1,000,000.00) for each accident, One Million Dollars (\$1,000,000.00) for each disease/policy limit, and One Million Dollars (\$1,000,000.00) for disease for each employee.

For programs that work with or serve youth under the age of twenty-one (21), coverage shall include Sexual Abuse and Molestation.

All policies should also include a Waiver of Subrogation. Insurance shall be written with Carriers approved in the State of Connecticut and with a minimum AM Best's Rating of "A-VIII".

City's Risk Manager may waive certain provisions or increase liability limits at his or her discretion. In addition, all Carriers are subject to approval by the City of Hartford.

The Applicant shall furnish a certificate of insurance at least ten (10) days before the Agreement is executed and prior to commencement of work thereunder the Applicant will be required to file with the Office of Central Grants a certificate of insurance on an ACORD 25 Form or equivalent satisfactory to the City's Risk Manager. In the description of operations section on the certificate of insurance so furnished, the following wording shall be included: "The City of Hartford is included as an Additional Insured on a primary and non-contributory basis to all policies except Workers Compensation. A waiver of subrogation has been included or endorsed on the policies contained in this certificate."

The undersigned hereby certifies that s/he is duly authorized to negotiate execute and deliver agreements, documents and other instruments in the name of and on behalf of the agency submitting this application for funding assistance, and that the information contained in this application is, to the best of his/her knowledge, true, correct, complete, and represents under penalty of law the true intended usage of the funds for which the application is being submitted and a true expression of the authority of the Applicant and its intention to comply with all terms of this application and any contract for funding awarded pursuant hereto.

\_\_\_\_\_

AUTHORIZED SIGNATURE (BLUE INK)

\_\_\_\_\_

PRINT NAME AND TITLE

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DATE (MM/DD/YEAR)