



**THE FOLLOWING IS A SUMMARY OF CCSF'S INSURANCE REQUIREMENTS.**

Applicant shall maintain in force, during the full term of the permit, insurance as follows:

1. General liability insurance with limits not less than \$1,000,000.00 each occurrence / **\$2,000,000 aggregate**, Combined Single Limit Bodily Injury and Property Damage, including Contractual Liability, Personal Injury, Broad form Property Damage, Products and Completed Operations Coverage;
2. If any vehicles will be operated by the applicant in connection with street fair or athletic event activities under the permit, Automobile Liability Insurance with limits not less than \$1,000,000.00 each occurrence Combined Single Limit Bodily Injury and Property Damage, including owned, non-owned and hired auto coverages, as applicable; and
3. If the applicant has employees, Workers Compensation with Employer's Liability not less than \$1,000,000.00 each accident.

***General Liability and Automobile Liability Insurance policies shall be endorsed to provide the following:***

- a) **Name as additional insured the City and County of San Francisco, its officers, agents and employees.**
- b) That such policies are primary insurance to any other insurance available to the Additional Insured with respect to any claims arising out of activities under the permit, and that Insurance applies separately to each insured against whom claim or suit is brought.

Certificates of insurance **and copies of additional insured policy endorsements**, in format and with insurers satisfactory to the City evidencing all applicable coverages shall be furnished to the City ten days prior to issuance of the permit and before commencing any operations under the permit, with complete copies of policies to be furnished to the City upon request.

The address on the certificate should be:

City & County of S.F.  
SFMTA  
1 South Van Ness Ave., 7<sup>th</sup> Floor  
S.F., CA 94103  
Attn: Temporary Street Closures

**NOTE: THERE HAVE BEEN SEVERAL CHANGES TO OUR INSURANCE REQUIREMENTS. THE NEW REQUIREMENTS ARE IN BOLD. PLEASE FORWARD THIS DOCUMENT TO YOUR INSURANCE BROKER.**