

CERTIFICATE NO.

ISSUE DATE (MM/DD/YYYY)

GSRMA-02	CO	CERTIFICATE OF COVERAGE	06/29/2018
Primary Insurance Provided by Golden State Risk Management Authority P.O. Box 706 Willows, CA 95988-0706		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 BELOW. THIS CERTIFICATE OF COVERAGE 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 and/or requesting a WAIVER OF SUBROGATION, the Memorandums of Coverage/Policies must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).	
GSRMA MEMBER: ALBION-LITTLE RIVER FIRE PROTECTION DISTRICT PO BOX 634 ALBION, CA 95410		COVERAGE AFFORDED BY A - Golden State Risk Management Authority COVERAGE AFFORDED BY B - COVERAGE AFFORDED BY C - COVERAGE AFFORDED BY D -	

Coverages
 THIS IS TO CERTIFY THAT THE MEMORANDUMS OF COVERAGE/POLICIES LISTED BELOW HAVE BEEN ISSUED TO THE MEMBER NAMED ABOVE FOR THE 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 COVERAGE AFFORDED BY THE MEMORANDUMS/POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF SUCH MEMORANDUMS/POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

ENT LTR	TYPE OF COVERAGE	POLICY #	COVERAGE EFFECTIVE DATE (MM/DD/YYYY)	COVERAGE EXPIRATION DATE (MM/DD/YYYY)	MEMBER'S SELF-INSURED RETENTION/ DEDUCTIBLE	LIMITS
A	WORKERS' COMPENSATION <input checked="" type="checkbox"/> WORKERS' COMPENSATION <input checked="" type="checkbox"/> EMPLOYERS' LIABILITY	JPA 0040	07/01/2018	07/01/2019	\$0	WORKERS' COMPENSATION: \$ 300,000 EMPLOYERS LIABILITY: \$ 300,000
A	GENERAL LIABILITY <input checked="" type="checkbox"/> GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCURRENCE	JPA 0040	07/01/2018	07/01/2019	\$ 0	\$ 250,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> NON-OWNED AUTO <input checked="" type="checkbox"/> HIRED AUTO <input checked="" type="checkbox"/> GARAGE LIABILITY	JPA 0040	07/01/2018	07/01/2019	\$ 0	\$ 250,000
A	CRIME <input checked="" type="checkbox"/> EMPLOYEE THEFT-PER LOSS <input checked="" type="checkbox"/> DEPOSITORS FORGERY OR ALTERATION <input checked="" type="checkbox"/> THEFT, DISAPPEARANCE AND DESTRUCTION <input checked="" type="checkbox"/> COMPUTER AND FUNDS TRANSFER FRAUD	JPA 0040	07/01/2018	07/01/2019	\$ 2,500	\$ 25,000
A	PROPERTY <input checked="" type="checkbox"/> ALL RISK <input checked="" type="checkbox"/> AUTO PHYSICAL DAMAGE <input checked="" type="checkbox"/> BOILER AND MACHINERY <input checked="" type="checkbox"/> TERRORISM	JPA 0040	07/01/2018	07/01/2019	\$ 1,000 \$ 25,000 \$ 250 Comp \$ 500 Coll \$ 1,000	ALL RISK: \$5,000 FLOOD: \$25,000 AUTO (ACV): \$10,000 AUTO (RCV): PER POLICY BOILER AND MACHINERY: \$5,000

Description of Operations/Locations/Vehicles/Special Items:
 AS RESPECTS EVIDENCE OF COVERAGE ONLY.

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APR 11 2019

BY: _____

Certificate Holder FOR THE PURPOSE OF EVIDENCE ONLY C/O ALBION-LITTLE RIVER FIRE PROTECTION DISTRICT P.O. BOX 634 ALBION, CA 95410	Cancellation SHOULD ANY OF THE ABOVE DESCRIBED MEMORANDUMS OF COVERAGES/POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE MEMORANDUMS OF COVERAGE/POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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GSRMA-02	CO	CERTIFICATE OF COVERAGE	06/29/2018
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CSAC Excess Insurance Authority C/O ALLIANT INSURANCE SERVICES, INC. P.O. BOX 6450 NEWPORT BEACH, CA 92658-6450 PHONE (949) 756-0271 / FAX (619) 699-0901 LICENSE #0C36861	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 BELOW. THIS CERTIFICATE OF COVERAGE 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 and/or requesting a WAIVER OF SUBROGATION, the Memorandums of Coverage/Policies must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).
	COVERAGE AFFORDED BY A - See attached schedule of insurers

MEMBER: Golden State Risk Management Authority P.O. Box 706 Willows, CA 95988-0706	COVERAGE AFFORDED BY B - CSAC Excess Insurance Authority
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GSRMA MEMBER: ALBION-LITTLE RIVER FIRE PROTECTION DISTRICT	COVERAGE AFFORDED BY C - National Union Fire Insurance Company of Pittsburgh, PA (AIG)
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ENT LTR	TYPE OF COVERAGE	MEMORANDUM # /POLICIES	COVERAGE EFFECTIVE DATE (MM/DD/YYYY)	COVERAGE EXPIRATION DATE (MM/DD/YYYY)	MEMBER'S SELF-INSURED RETENTION/ DEDUCTIBLE	LIMITS
A	WORKERS' COMPENSATION <input checked="" type="checkbox"/> WORKERS' COMPENSATION <input checked="" type="checkbox"/> EMPLOYERS' LIABILITY	See attached for insurers policy numbers	07/01/2018	07/01/2019	\$ 300,000	WORKERS' COMPENSATION: Statutory EMPLOYERS LIABILITY: \$5,000,000
B	GENERAL LIABILITY <input checked="" type="checkbox"/> EXCESS GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCURRENCE	EIA-PE 18 EL-63	07/01/2018	07/01/2019	\$ 250,000	Difference between \$1,000,000 and the Member's Self-Insured Retention
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> HIRED AUTO <input checked="" type="checkbox"/> NON-OWNED AUTO <input checked="" type="checkbox"/> GARAGE LIABILITY	EIA-PE 18 EL-63	07/01/2018	07/01/2019	\$ 250,000	Difference between \$1,000,000 and the Member's Self-Insured Retention
C	CRIME	15909765	06/30/2018	06/30/2020	\$25,000	\$ 10,000,000 Per Occurrence \$ 5,000,000 Per Occurrence excess of \$10,000,000
B	PROPERTY <input checked="" type="checkbox"/> ALL RISK <input checked="" type="checkbox"/> FLOOD <input checked="" type="checkbox"/> AUTO PHYSICAL DAMAGE (ONLY IF SCHEDULED) <input checked="" type="checkbox"/> BOILER AND MACHINERY <input checked="" type="checkbox"/> TERRORISM TERRORISM LIMIT IS SHARED BY ALL MEMBERS IN ALL TOWERS ALL OTHER LIMITS ARE SHARED PER TOWER	EIA PPR19-21	03/31/2019	03/31/2020	\$ 5,000 \$ 25,000 \$10,000 PER POLICY \$ 5,000	\$25,000,000 PER OCC ALL RISK \$25,000,000 PER OCC ANNUAL AGG. LIMIT APPLIES TO FLOOD AUTO PHYS. DAMAGE DED. \$25,000,000 PER ACCIDENT BOILER & MACHINERY LIMIT

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