

Sullivan County Land Bank Insurance Requirements (for Subcontractors and Vendors, as applicable)

Certificate of Insurance (ACORD 25) evidencing Commercial General Liability Insurance in amounts not less than:

- \$1,000,000 per occurrence
- \$2,000,000 in the annual aggregate
- \$2,000,000 per project aggregate
- \$2,000,000 products/completed operations aggregate
- Naming Sullivan County Land Bank Corporation as an Additional Insured with Primary Non-Contributory language.
- Must include list of exclusions
- Endorsements should include:
 - Additional Insured including premises operations and Product/Completed Operations
 - Waiver of Subrogation
 - 30-day notice of cancellation

Certificate of Insurance (ACORD 25) evidencing Worker's Compensation Insurance (in amounts consistent with state statutory requirements), and naming Sullivan County Land Bank Corporation as Certificate Holder. Endorsements should include:

- Waiver of Subrogation
- 30-day notice of cancellation

Certificate of Insurance (ACORD 25) evidencing Auto Insurance in amounts not less than:

- \$1,000,000, for all owned, non-owned and hired automobiles. If no owned autos, coverage may be extended from the CGL policy.
- Naming Sullivan County Land Bank Corporation as an Additional Insured with Primary Non-Contributory language.
- Waiver of Subrogation
- 30-day notice of cancellation endorsement

Certificate of Insurance (ACORD 25) evidencing Environmental Pollution Liability Insurance (if the work involves environmental remediation of any kind)

- in amount not less than \$1,000,000 per occurrence

Certificate of Insurance (ACORD 25) evidencing Umbrella Insurance

- in amounts not less than \$1,000,000 per occurrence
- Naming Sullivan County Land Bank Corporation as an Additional Insured with Primary Non-Contributory language.
- Waiver of Subrogation
- 30-day notice of cancellation endorsement

REQUIREMENTS FOR ALL INSURANCE:

- Policy must be current, not expired, and include all endorsements
- Certificate must be signed by an authorized representative of the insurance carrier,
- Additional Insured/ Certificate holder/ (as required below) must appear as:
 - Sullivan County Land Bank Corporation
 - 100 North Street, Monticello, NY 12701