



CERTIFICATE OF LIABILITY INSURANCE

04/26/2017

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 Om Insurance 1336 Trestlewood Lane San Jose, CA 95138	CONTACT NAME: Pal
	PHONE (A/C, No, Ext): 4082610884 FAX (A/C, No): 4085169789
	E-MAIL ADDRESS: alissetyp@gmail.com
	INSURER(S) AFFORDING COVERAGE
	INSURER A : Lloyds of London
	INSURER B : Hiscox Insurance
	INSURER C :
	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 INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	<input checked="" type="checkbox"/>	ATR/O/232299	02/17/17	02/17/18	EACH OCCURRENCE \$ 2000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 2000000 GENERAL AGGREGATE \$ 4000000 PRODUCTS - COMP/OP AGG \$ 2000000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER.					
A	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/>	ATR/O/232299	02/17/17	02/17/18	COMBINED SINGLE LIMIT (Ea accident) \$ 2000000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS					
<input checked="" type="checkbox"/>	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB	<input checked="" type="checkbox"/>	ATR/O/232299			EACH OCCURRENCE \$ 5000000 AGGREGATE \$ 5000000
	DED RETENTION \$					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N	N/A	9114244-2017	02/17/17	02/17/18	PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 2000000 E.L. DISEASE - EA EMPLOYEE \$ 2000000 E.L. DISEASE - POLICY LIMIT \$ 2000000
A	Sexual Abuse and Molestation/ Professional Liability/E & O		MPL 1693279 16	02/02/17	02/02/18	2000000/2000000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 MT. DIABLO UNIFIED SCHOOL DISTRICT is named additional insured with respect of liability arising out of work or operations performed by the consultant/Named insured.

CERTIFICATE HOLDER	CANCELLATION
MT. DIABLO UNIFIED SCHOOL DISTRICT 1936 Carlotta Dr, Concord CA-94519	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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POLICY CHANGE DOCUMENT

POLICY NO.: ATR/O/232299

Lloyds of London	Om Insurance
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Name Insured 360 Degree Customer, Inc

Mailing Address 4423 Fortran St, Ste 114 San Jose, CA - 95134

Policy Period: 02/17/2017 TO 02/17/2018

Description:

In Consideration of the premium reflected, the policy is amended as indicated below:

Added:

Additional Insured as follows:

Mt. Diablo Unified School District
1936 Carlotta Drive
Concord, CA 94519

Removed:

Additional Insured as follows:

Total Annual Additional Return Premium \$

0.00
NO CHANGE

Total prorated

Additional/return Premium \$ 0.00
NO CHANGE

COUNTERSIGNED

(Date)

By

Cherie Han Wang
(Authorized Representative)

03/11/2016
Issue Date

Insurance Policy

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Lloyds of London

Additional Insured Schedule

Policy Number ATR/O/232299

Additional Insured

Lake Washington School District
PO Box 97039
Redmond, WA 98073-9739

PI-PLSP-103 - Miscellaneous Professional

Additional Insured

William S. Hart UHSD
21380 Centre Pointe Pkwy
Santa Clarita, CA 91350

Businessowners

Additional Insured

Elk Grove Unified School District
9510 Elk Grove Florin Rd
Elk Grove, CA 95624-1801

Businessowners

Additional Insured

San Roman Valley Unified School District
its subsidiaries, officials, & employees
699 Old Orchard Dr
Danville, CA 94526-4331

Businessowners

Additional Insured

Mt. Diablo Unified School District
1936 Carlotta Dr
Concord, CA 94519-1358

Businessowners

Lloyds of London

Additional Insured Schedule

Policy Number PHSD1007324

Additional Insured

Arcadia Unified School District
150 S 3rd Ave
Arcadia, CA 91006-3703

Businessowners

Additional Insured

Lake Elsinore Unified School District
545 Chaney St Bldg E
Lake Elsinore, CA 92530-2712

Businessowners

Additional Insured

Antioch Unified School District
510 G St
Antioch, CA 94509-1259

Businessowners

Additional Insured

Menifee Union School District
30205 Menifee Rd.
Menifee, CA 92584

Businessowners

Santa Clara Unified School District
1889 Lawrence Road
Santa Clara, CA 95051

Businessowners

Mt. Diablo Unified School District
1936 Carlotta Drive
Concord, CA 94519

Businessowners