

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/30/2021

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 have ADDITIONAL INSURED provisions or 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).

Va 10	) St	eo Insurance Brokerage tony Point Rd, Suite 160 Rosa CA 95401				CONTACT NAME: Rebecca Burns PHONE (A/C, No, Ext): 707-546-2300 E-MAIL ADDRESS: Certs@vantreo.com					
) Sa	nıa	Rosa CA 95401				INSURER(S) AFFORDING COVERAGE NAIC #					
						INSURER A: QBE Insurance Corporation				NAIC#	
INSL	RED				ANOVINC-01	INSURER B: Republic Indemnity Company of California					
		A, Inc.				INSURER C : Nonprofits' Insurance Alliance of California					
		oncourse Blvd. Rosa CA 95403				INSURER D:					
Ja	ila	Nosa CA 95405				INSURER E :					
COVERAGES CERTIFICATE NUMBER: 1925094473								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		SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	TS	S	
Α	Х	COMMERCIAL GENERAL LIABILITY	Y	Y	2021-08665	8/1/2021	8/1/2022	EACH OCCURRENCE	\$ 1,000,000		
		CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,0		
								MED EXP (Any one person)	\$ 20,00		
		,	-					PERSONAL & ADV INJURY	\$ 1,000		
	GEN	N'L AGGREGATE LIMIT APPLIES PER:	-					GENERAL AGGREGATE	\$ 3,000		
	X	POLICY PRO- LOC						PRODUCTS - COMP/OP AGG	\$3,000		
		OTHER:							\$	,000	
Α	AUT	TOMOBILE LIABILITY	N	N	2021-08665	8/1/2021	8/1/2022	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000	,000	
	Х	ANY AUTO						BODILY INJURY (Per person)	\$		
		OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident	\$		
		HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$		
		ASTOC SALT						( S desire)	\$		
Α	Х	X UMBRELLA LIAB X OCCUR			2021-08665-UMB	8/1/2021	8/1/2022	EACH OCCURRENCE	\$ 5,000,000		
		EXCESS LIAB CLAIMS-MAD	E					AGGREGATE	\$ 5,000	,000	
	DED X RETENTION \$ 10,000								\$		
В		RKERS COMPENSATION EMPLOYERS' LIABILITY		N	25104806	8/1/2021	8/1/2022	X PER OTH-			
	ANY	PROPRIETOR/PARTNER/EXECUTIVE	1					E.L. EACH ACCIDENT	\$ 1,000,000		
	(Man	ndatory in NH)	MBEREXCLUDED?					E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000		
	If yes	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000,000		
С		essional se or Molestation			2011-08665-DO	8/1/2021	8/1/2022	Aggregate 3,000,000 Aggregate 3,000,000	egate 3,000,000 Per C Pegate 3,000,000 Per C		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  * Improper Conduct Includes Sexual Misconduct and Child Abuse  RE: All California Operations of the Named Insured Mt. Diablo Unified School District its officers, officials, agents, employees and volunteers are named as Additional Insured with respects to General Liability per attached form PI-GLD-HS 10 11 and Primary & Non-Contributory per attached from PI-GL-005 (07/12).											
						•				* (5)	
		1									
						241051145101					
CEF	RIIF	ICATE HOLDER				CANCELLATION					
Mt. Diablo Unified School District 1936 Carlotta Drive						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
î		Concord CA 94519 USA				AUTHORIZED REPRESENTATIVE  Velbugg Von Les					



POLICY NUMBER: 2021-08665

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# ADDITIONAL INSURED PRIMARY AND NON-CONTRIBUTORY ENDORSEMENT FOR PUBLIC ENTITIES

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

Name of Person or Organization:	a

**SCHEDULE** 

#### A. Section II - WHO IS AN INSURED is amended to include:

- **4.** Any public entity as an additional insured, and the officers, officials, employees, agents and/or volunteers of that public entity, as applicable, who may be named in the Schedule above, when you have agreed in a written contract or written agreement presently in effect or becoming effective during the term of this policy, that such public entity and/or its officers, officials, employees, agents and/or volunteers be added as an additional insured(s) on your policy, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
  - a. Your negligent acts or omissions: or
  - b. The negligent acts or omissions of those acting on your behalf;

in the performance of your ongoing operations.

No such public entity or individual is an additional insured for liability arising out of the sole negligence by that public entity or its designated individuals. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.

#### B. Section III - LIMITS OF INSURANCE is amended to include:

- **8.** The limits of insurance applicable to the public entity and applicable individuals identified as an additional insured(s) pursuant to Provision A.4. above, are those specified in the written contract between you and that public entity, or the limits available under this policy, whichever are less. These limits are part of and not in addition to the limits of insurance under this policy.
- C. With respect to the insurance provided to the additional insured(s), Condition 4. Other Insurance of SECTION IV COMMERCIAL GENERAL LIABILITY CONDITIONS is replaced by the following:

#### 4. Other Insurance

#### a. Primary Insurance

This insurance is primary if you have agreed in a written contract or written agreement:

(1) That this insurance be primary. If other insurance is also primary, we will share with all that other insurance as described in **c.** below; or

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POLICY NUMBER: 2021-08665

(2) The coverage afforded by this insurance is primary and non-contributory with the additional insured(s)' own insurance.

Paragraphs (1) and (2) do not apply to other insurance to which the additional insured(s) has been added as an additional insured or to other insurance described in paragraph **b.** below.

#### b. Excess Insurance

This insurance is excess over:

- 1. Any of the other insurance, whether primary, excess, contingent or on any other basis:
  - (a) That is Fire, Extended Coverage, Builder's Risk, Installation Risk or similar coverage for "your work";
  - (b) That is fire, lightning, or explosion insurance for premises rented to you or temporarily occupied by you with permission of the owner;
  - (c) That is insurance purchased by you to cover your liability as a tenant for "property damage" to premises temporarily occupied by you with permission of the owner; or
  - (d) If the loss arises out of the maintenance or use of aircraft, "autos" or watercraft to the extent not subject to Exclusion g. of SECTION I – COVERAGE A – BODILY INJURY AND PROPERTY DAMAGE.
  - (e) Any other insurance available to an additional insured(s) under this Endorsement covering liability for damages which are subject to this endorsement and for which the additional insured(s) has been added as an additional insured by that other insurance.
- (1) When this insurance is excess, we will have no duty under Coverages A or B to defend the additional insured(s) against any "suit" if any other insurer has a duty to defend the additional insured(s) against that "suit". If no other insurer defends, we will undertake to do so, but we will be entitled to the additional insured(s)' rights against all those other insurers.
- (2) When this insurance is excess over other insurance, we will pay only our share of the amount of the loss, if any, that exceeds the sum of:
  - (a) The total amount that all such other insurance would pay for the loss in the absence of this insurance; and
  - (b) The total of all deductible and self-insured amounts under all that other insurance.
- (3) We will share the remaining loss, if any, with any other insurance that is not described in this **Excess Insurance** provision and was not bought specifically to apply in excess of the Limits of Insurance shown in the Declarations of this Coverage Part.

#### c. Methods of Sharing

If all of the other insurance available to the additional insured(s) permits contribution by equal shares, we will follow this method also. Under this approach each insurer contributes equal amounts until it has paid its applicable limit of insurance or none of the loss remains, whichever comes first.

If any other the other insurance available to the additional insured(s) does not permit contribution by equal shares, we will contribute by limits. Under this method, each insurer's share is based on the ratio of its applicable limit of insurance to the total applicable limits of insurance of all insurers.

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## NONPROFITS INSURANCE ALLIANCE OF CALIFORNIA (NIAC)

www.insurancefornonprofits.org

#### **COMMERCIAL UMBRELLA POLICY DECLARATIONS**

PRODUCER:

POLICY NUMBER: 2021-08665-UMB

Acrisure of California, LLC 1950 W Corporate Way #1 Anaheim, CA 92801

RENEWAL OF NUMBER: 2020-08665-UMB-NPO

Item 1 NAME OF INSURED AND MAILING ADDRESS:

Anova, Education & Behavioral Consultation\*

\*SEE SCHEDULE NI FOR FULL NAMED INSURED

220 Concourse Blvd. Santa Rosa, CA 95403

Item 2 POLICY PERIOD:

FROM 8/1/2021 TO 8/1/2022

AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

**BUSINESS DESCRIPTION:** 

Classroom observation and counseling

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.

## Item 3 THE ANNUAL AND MINIMUM PREMIUM DUE AT INCEPTION:

\$7,450

- 000 000

5,000,000

(premium includes Terrorism Coverage - Certified Acts: \$302 but only for policies that indicate coverage on Schedule A - Schedule of Underlying Insurance)

#### Item 4 LIMITS OF INSURANCE:

h.

6	a.	Occurrence / Accident / Injury / Claim Limits (where applicable):	5,000,000
		<ul> <li>Each Occurrence - Commercial General Liability and Products- Completed Operations Liability</li> </ul>	
		ii) Each Accident - Business Auto Liability	
		iii) Each Injury - Liquor Liability	
		iv) Each Claim - Employee Benefits Liability	
b	ο.	Each Claim - Directors and Officers Liability	Excluded
C	Э.	Each Claim - Improper Sexual Conduct and Physical Abuse Liability	5,000,000
C	d.	Each Claim - Social Service Professional Liability	5,000,000
A	٩gg	regate limits:	
e	€.	Commercial General Liability, Business Auto Liability, Products- Completed Operations Liability, Liquor Liability, and Employee Benefits Liability Aggregate	
		(where applicable):	5,000,000
f		Directors and Officers Liability Aggregate	Excluded
g	<b>3</b> .	Improper Sexual Conduct and Physical Abuse Liability Aggregate	5,000,000

Social Service Professional Liability Aggregate .....

#### Item 5 RETROACTIVE DATES - SEE SCHEDULE OF UNDERLYING INSURANCE

FORMS AND ENDORSEMENTS ATTACHED TO THIS POLICY AT INCEPTION (NUMBER AND EDITION DATE):
CU 21 30 01 15, CU 21 33 a 01 15, CU 21 33 e 01 15, CU 21 33 s 01 15, IL 09 99 12 20, NIAC-E003 UMB 08 20, NIAC-E133 UMB 05 20, NIAC-E140 UMB 08 20, NIAC-E180 UMB 01 21, NIAC-E253 UMB 08 21, NIAC-E42 UMB 09 19, SCHEDULE A 01 80, UMB 231 06 16, UMB 232 06 16, UMB-100 05 21, UMB62 05 13, SCHEDULE NI



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## **COMMERCIAL UMBRELLA POLICY DECLARATIONS**

PRODUCER:

Acrisure of California, LLC 1950 W Corporate Way #1 Anaheim, CA 92801 POLICY NUMBER: 2021-08665-UMB

RENEWAL OF NUMBER: 2020-08665-UMB-NPO

COUNTERSIGNED:

7/28/2021

BY

Samel C. D.

(AUTHORIZED REPRESENTATIVE)

THESE DECLARATIONS, THE ATTACHED SCHEDULE OF UNDERLYING INSURANCE, TOGETHER WITH THE ATTACHED SCHEDULE OF FORMS AND ENDORSEMENTS, AND ANY FORMS AND ENDORSEMENTS WE MAY LATER ATTACH TO REFLECT CHANGES, MAKE UP AND COMPLETE THE ABOVE NUMBERED POLICY.

Notice: This risk pooling contract is issued by a pooling arrangement authorized by California Corporations Code Section 5005.1. The pooling arrangement is not subject to all of the insurance laws of the State of California and is not subject to regulation by the Insurance Commissioner. Insurance guaranty funds are not available to pay claims in the event the risk pool becomes insolvent.