

Cornell Cooperative Extension Construction Contract Insurance Requirements Checklist

Certificate of Insurance (COI) Forms

- ☐ ACORD 25 Certificate of Liability Insurance
- ☐ ACORD 855NY Form attached to the ACORD 25

Commercial General Liability

- ☐ Commercial General Liability Coverage ISO CG 00 01 or a substitute form providing equivalent coverage (including the tort liability of another assumed in a business contract). *If Coverage on URB Policy, it must be on the LS-6 form and must show on the COI*
- ☐ Minimum Limits of at least **\$1,000,000 Per Occurrence**
- ☐ Minimum Limits of at least **\$2,000,000 General Aggregate**
- ☐ Products and Completed Operations Coverage included
- ☐ General Aggregate applies separately to each project/location, ISO form CG 2503 (3/97) or similar form.

Umbrella / Excess Liability

- ☐ Commercial Umbrella Liability Coverage provided
- ☐ Umbrella/Excess Liability limits meet contract requirements

Commercial Automobile Liability

- ☐ Commercial Automobile Liability Coverage
- ☐ Covers **Owned Automobiles, If Any**
- ☐ Covers **Non-Owned Automobiles**
- ☐ Covers **Hired Automobiles**
- ☐ Minimum Limit: **\$1,000,000 Combined Single Limit**

Workers' Compensation

- ☐ New York State Statutory Workers' Compensation Coverage

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Owners and Contractors Protective Liability (OCP) – IF REQUIRED

- ☐ CCE as Owner is named insured, with XCU exclusion deleted.
- ☐ Limits of minimum **\$1,000,000 Each Occurrence / \$2,000,000 Aggregate**

Performance Bonding (IF REQUIRED)

- ☐ CCE as Owner is named Obligee.
- ☐ Bond Limit minimum in excess of the value of the project

Additional Insured Documentation

- ☐ Copies of Additional Insured Endorsements provided
- ☐ Additional Insured wording includes:
 - ☐ "Cornell Cooperative Extension of Tompkins County, its officers, directors, employees, Volunteers, and agents"
 - ☐ Additional Party(ies) noted in Contract (As Applicable)
- ☐ CG 20 10 (or equivalent) – Additional Insured for Premises & Operations
- ☐ CG 20 37 (or equivalent) – Additional Insured for Products & Completed Operations

Additional Policy Endorsements

- ☐ Copy of Waiver of Subrogation Endorsement/Policy Form
- ☐ Copy of Primary & Non-Contributory Endorsement/Policy Form

Additional Verified Items

- ☐ **Named insured matches contracting entity exactly**
- ☐ Certificate of Insurance must be less than 30 Days old and on the New York State Department of Financial Services-approved form.
- ☐ All required endorsements attached and reviewed
- ☐ Insurance requirements satisfy contract requirements