



Brady Commercial Construction Services, Inc.
Vendor Insurance Requirements

The term "Vendor" shall mean and include all Suppliers, Subcontractors and Sub-Subcontractors of every tier.

Prior to commencement of any Work, and as a condition precedent to payment, Vendors are required, at their sole expense, to maintain the following insurance on their own behalf during the life of the Subcontract, insurance of the type and in an amount **not less** than listed in the Special and Other Conditions, or required by law and or as listed below:

1. Coverages:

a. Worker's Compensation and Employee-Liability: As required by the State in which the Work is to be performed and elsewhere as may be required and shall include, but no less than:

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| Workers Compensation | Statutory |
| Employer's Liability | \$1,000,000 |

1. This policy must include a Waiver of Subrogation in favor of Brady Commercial Construction, Inc.
2. Binders are not acceptable.
3. 10-day notice of cancellation of non-payment of Premium must be attached.

b. **Commercial General Liability: (including Mechanical, Electrical, Plumbing, Elevator, Structural Steel, Metal Deck, Miscellaneous Metals, Plaster/Drywall/Fireproofing, Aluminum/Glass, Fire Protection and Roofing Subcontractors).**

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|---------------------------------|-----------------------------|
| Occurrence Form | |
| Bodily Injury & Property Damage | \$2,000,000 Each Occurrence |
| Products/Completed Operations | \$2,000,000 Each Occurrence |
| General Aggregate (Per Project) | \$2,000,000 |

1. Coverage must be written on an Occurrence form (ISO CG 00 01 or equivalent)
2. Contractor must be named as an Additional Insured (ISO CG 20 10 11 85 or equivalent including Completed Operations coverage.)
3. An additional insured endorsement must accompany the certificate.
4. The policy number **MUST** appear on the endorsement.
5. The General Aggregate Limit shall apply separately to **each project**.
6. Coverage must be endorsed to be primary and noncontributing as respects the Additional Insured.
7. This policy must include a Waiver of Subrogation in favor of Brady Commercial Construction Services, Inc.
8. Binders are not acceptable.
9. 10-day notice of cancellation of non-payment of Premium must be attached.



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Unless otherwise indicated, Products and Completed Operations Coverage must be maintained for a period of at least two (2) years after Substantial Completion of any Project.

For all other Subcontractors not listed above:

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| Bodily Injury & Property Damage | \$1,000,000 Each Occurrence |
| Products/Completed Operations | \$1,000,000 Each Occurrence |
| General Aggregate (per project) | \$1,000,000 |

1. Coverage must be written on an Occurrence form (ISO CG 00 01 or equivalent.)
2. Contractor must be named as an Additional Insured (ISO CG 20 10 11 85 or equivalent including Completed Operations coverage.)
3. An additional insured endorsement must accompany the certificate.
4. The policy number **MUST** appear on the endorsement.
5. The General Aggregate Limit shall apply separately to **each project**.
6. Coverage must be endorsed to be primary and noncontributing as respects the Additional Insured.
7. This policy must include a Waiver of Subrogation in favor of Brady Commercial Construction Services, Inc.
8. Binders are not acceptable.
9. 10-day notice of cancellation of non-payment of Premium must be attached.

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| c. Automobile Liability | |
| Combined Single Limit | \$1,000,000 Each Accident, or |
| Bodily Injury | \$1,000,000 Each Person |
| | \$1,000,000 Each Occurrence |
| Property Damage | \$1,000,000 Each Occurrence |

1. Coverage must include owned, non-owned and hired automobiles.
 2. This policy must include a Waiver of Subrogation in favor of Brady Commercial Construction Services, Inc.
 3. Contractor must be named additional Insured.
 4. An additional insured endorsement must accompany the certificate.
 5. The policy number **MUST** appear on the endorsement.
 6. Binders are not acceptable.
 7. 10-day notice of cancellation of non-payment of Premium must be attached.
2. Coverage is primary for the Vendor and Brady Commercial Construction Services, Inc. and (if applicable) any other additional Insureds.
 3. Your Certificate must state that Brady Commercial Construction Services, Inc. will be given **AT LEAST 30 DAYS WRITTEN NOTICE OF CANCELLATION. Please strike out the words "Endeavor to" and "But failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives."**



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4. Waiver of Subrogation
 - a. The Vendor waives all rights of subrogation against Brady Commercial Construction Services, Inc., the Owner, and all Additional Insureds for loss or damage covered by any of the insurance maintained by the Vendor.
 - b. If any of the policies of insurance required under this Vendor require an endorsement to provide for waivers of subrogation, then the names Insureds of such policies will cause them to be so endorsed.
5. The amount and coverage of insurance provided in the aforementioned insurance coverages shall not be construed to be a limitation of the liability on the part of the Vendor.
6. In the event of a failure of the Vendor to furnish and maintain these insurance requirements and to furnish satisfactory evidence thereof, Brady Commercial Construction Services, Inc. shall have the right, but not the obligation, to acquire the same for all parties on behalf of the Vendor who agrees to furnish all necessary information thereof and to pay the cost thereof to Brady Commercial Construction Services, Inc. immediately upon presentation of an invoice.
7. Certificates must be completed properly. All Coverage blocks must be checked. The subcontractor shall submit Certificates of Insurance and the required endorsements no later than ten (10) days prior to commencement of his work on site. No Subcontractor will be allowed to continue on site after the expiration of full insurance coverage. Subcontractor partial payments shall be withheld until current Certificates of Insurance and the required endorsements are submitted to Brady Commercial Construction Services, Inc.
8. **Insurance must be in effect and current through retention.**
9. **All carriers issuing above policies shall be issued by CA admitted carrier with A.M. BEST ratings of no less than A-; however, surplus lines carriers listed on California Department of Insurance's "LIST OF ELIGIBLE SURPLUS LINE SUPPLIERS" shall also be acceptable with A.M. BEST ratings of no less than A- and financial rating of VII or above. CGL policy must be on Occurrence form ISO CG 00 01 or equivalent.**
10. **Additional Insured Endorsements/Certificates Holder Language must read exactly:**
Brady Commercial Construction Services, Inc., its agents, officers, and employees are named additional insured per form.
Brady Commercial Construction Services, Inc.
9804 Crescent Center Drive, Suite 602
Rancho Cucamonga, CA 91773
11. **Additional Insured Endorsement must be provided on form CG 20 10 11 85 or equivalent.**