



## City of Duluth

DEPARTMENT OF PUBLIC WORKS/UTILITIES

Engineering Division

211 City Hall • Duluth, MN 55802

(218) 730-5200 Fax: (218) 730-5907

Rev 6-17-08

### **INSURANCE REQUIREMENTS FOR ISSUING EXCAVATION & MISCELLANEOUS PERMITS from the Engineering Division**

By ordinance, the City of Duluth requires both a bond and liability coverage.

#### **BOND**

One of the following is required:

- 1) \$10,000 Annual Street Obstruction Bond on the City's bond form.
- 2) \$20,000 Annual Street Obstruction/Wreckers Bond on the City's bond form.

#### **LIABILITY COVERAGE**

- 1) Permittee must provide evidence of insurance in a licensed company meeting City approval in the following amounts:

\$500,000/\$500,000 bodily injury

\$100,000/\$100,000 property damage

- 2) Coverage must include:
  - a) **City of Duluth listed as additional insured under Public Liability and Automobile Liability.**
  - b) **Use of an "Acord" form as a certificate of insurance shall be accompanied by two forms:**
    - (1) **ISO Additional Insured Endorsement (CG-2010 pre-2004)**
    - (2) **Notice of Cancellation Endorsement (IL 7002) or an equivalent, as approved by the City of Duluth's Attorney's Office**  
(samples on reverse side)
  - c) Premises, operations, independent contractors, products, completed operations, and contractual liability must be listed.
  - d) Explosion, collapse, underground property damage coverage must be included *where* permit authorizes such work.

For questions regarding the permits or forms, please call the Engineering Division at 730-5200.

Questions pertaining to legal issues should be directed to:  
Don Douglas, Claims Adjuster, 218/730-5276

**PRE-2004 CG 2010**

- A. Section II - Who Is An Insured** is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of your ongoing operations performed for that insured.

\* \* \* \* \*

**NOTICE OF CANCELLATIONS ENDORSEMENT**

All Coverage Parts Included in this policy are subject to the following condition:  
If we cancel this policy, for any reason other than nonpayment

**IL-7002 (10-90)**

of premium, we will mail advance notice to the person(s) or organization(s) as shown in the Schedule.

**SCHEDULE**

<u>Person or Organization (Name and Address)</u>	<u>Advance Notice (Days)</u>
_____ City of Duluth 211 City Hall Duluth, MN 55802	30