



Hello!

Thank you for choosing the Dr. Dianne G. Van Hook University Center for your event!

In addition to the Application/Permit/Facility Use Agreement and the Save Harmless Agreement and Covenant Not to Sue document, please email me a **Certificate of Insurance** and the **Additional Insured Endorsement(s)** at your earliest convenience .

**Insurance Requirements:**

**The Certificate Holder must be:**                      **Santa Clarita Community College District**  
26455 Rockwell Canyon Road  
Santa Clarita, CA 91355

User agrees to maintain, in full force and effect, at Users expense, the following insurance coverage from an admitted carrier in the State of California with a Best Rating of A-VII or higher:

- (i) Commercial General Liability insurance with limits of not less than One Million Dollars (\$1,000,000) per occurrence bodily injury, broad form property damage, and blanket contractual liability, written on an "occurrence" form;
- (ii) \$2,000,000 aggregate including bodily injury, broad form property damage and blanket contractual liability
- (iii) Employer's Liability Insurance with limits of not less than One Million Dollars (\$1,000,000) per occurrence;
- (iv) Workers' Compensation insurance as required by statutory insurance requirement of the State of California; and
- (v) Automobile Liability covering all owned, non-owned and hired vehicles with combined single limit for bodily injury and/or property damage of not less than One Million Dollars (\$1,000,000).

Description of Operations: If applicable, enter a description of the project or services, activities to be conducted, description of location, and/or vehicles. Additionally, the following language must be added: "Santa Clarita Community College District, District's Board of Trustees, its officers, agents, employees, and volunteers are named as Additional Insured under its policy(ies)".

Additional Insured Endorsement Form: Accompanying the Certificate of Insurance must be a separate endorsement to the policy naming: Santa Clarita Community College District, College of the Canyons Foundation, District's Board of Trustees, its directors, its officers, agents, employees, and volunteers as additional insured under its policy(ies).

The Certificate(s) of Insurance shall provide thirty (30) days prior written notice of cancellation.

The user shall deliver the Certificate(s) of Insurance, along with a copy of the Additional Insured Endorsement(s), which shall be subject to the District's approval for adequacy of protection, at least one week before the facility use, or the facility permit will automatically be canceled.

Thank you!  
Cassidy Butow  
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