

# SAMPLE Certificate of Liability Insurance (COI)

*\*Insurance is required for Special Use Permits and all Contractual Vendors\**

Please see sample certificate below and must have the following noted:

1. Type of insurance must be "Commerical General Liability."
2. Amount of coverage per occurrence must be \$1,000,000 and General Aggregate of \$2,000,000 required.
3. Tinley Park-Park District must be listed **specifically** as "Additional Insured."
4. Address to be used on insurance should reflect our **Main Office at 8125 W. 171st St., Tinley Park, IL 60477**
5. Certificates of Insurance must be received at Park District Main Office at least 14 days prior to scheduled event.

ACORD™		CERTIFICATE OF LIABILITY INSURANCE			Date (MM/DD/YY)	
PRODUCER		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.				
		INSURERS AFFORDING COVERAGE			NAIC #	
INSURED		Insurer A				
		Insurer B				
		Insurer C				
		Insurer D				
COVERAGES						
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 AGGREGATE. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.						
Insr Ltr	Addl Insurd	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMITS
1		GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE OCCUR  Gen'l Aggregate Limit Applies Per Policy Project Loc				Each Occurrence \$1,000,000
		Damage to rented Premises (Ex occurrence)				\$
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS  Project Loc				COMBINED SINGLE LIMIT (Each accident) \$
		BODILY INJURY (Per person)				\$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> Project Loc				BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident)
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> Occurrence <input type="checkbox"/> Claims Made <input type="checkbox"/> Deductible \$  <input type="checkbox"/> Retention \$				AUTO ONLY - EA ACCIDENT \$
						OTHER THAN AUTO ONLY EACH ACCIDENT \$
		Workers Compensation and Employers' Liability ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				AGGREGATE \$
						EACH OCCURRENCE \$
		OTHER				AGGREGATE \$
						E.L. EACH ACCIDENT \$
		Tinley Park-Park District is named additional insured. (Cannot state "per written contract")				E.L. DISEASE - Each Employee \$
						E.L. DISEASE - Policy Limit \$
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS						
CERTIFICATE HOLDER			CANCELLATION			
Tinley Park-Park District 8125 W. 171st St. Tinley Park, IL 60477			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL ____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT. BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.			
			AUTHORIZED REPRESENTATIVE			
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Tinley Park-Park District, 8125 W 171st St, Tinley Park



708-342-4200



tinleyparkdistrict.org

