



## LAWRENCE LIVERMORE NATIONAL LABORATORY

### INSURANCE INSTRUCTIONS

The following instructions and Sample Certificate of Insurance are provided to assist Subcontractors in complying with the insurance requirements for Lawrence Livermore National Security, LLC (“LLNS”) Subcontracts.

All required insurance certificates and endorsements must be submitted to EXIGIS LLC (EXIGIS) via its online insurance compliance services portal. The Subcontractor will receive an introductory E-Mail from EXIGIS instructing the Subcontractor to log into the EXIGIS system and provide appropriate broker contact information. EXIGIS will then work directly with the Subcontractor’s broker to ensure prompt broker submission of the required insurance documentation.

For further information, contact the assigned LLNS Contract Administrator.

1. Each type of insurance required by the Subcontract must be listed on the Subcontractor’s Certificate of Insurance.
2. The dollar limits for each type of insurance must be at or above the minimum dollar limits specified in the Subcontract’s [Indemnification and Insurance Provisions \(I&I\) incorporated document](#).
3. The dates of coverage for all types of insurance must be current.
4. The minimum dollar limits specified in the Subcontract may be met through the use of Excess/Umbrella Liability Insurance and must be reflected in the Certificate of Insurance.
5. The general liability insurance must be endorsed to name “Lawrence Livermore National Security, LLC and its members and affiliates and the U.S. Government” (not “LLNS” or “Lawrence Livermore National Laboratory”) as “**additional insureds.**” This coverage must be provided on a separate endorsement.
6. The Certificate of Insurance must include a “**waiver of subrogation**” provision for the general liability and workers’ compensation insurance in favor of Lawrence Livermore National Security, LLC and its members and affiliates and the U.S. Government. This coverage must be provided on a separate endorsement.
7. The Certificate of Insurance and any applicable endorsement(s) must be issued by properly authorized representatives from insurance companies authorized to do business in California.
8. The insurance must be written on a “per occurrence” basis. Insurance shall not be written on a “claims-made” basis/form or subject to a self-insured retention (SIR) without the written approval of the LLNS Contract Administrator.
9. The Subcontractor shall ensure all required insurance certificates and endorsements are submitted to EXIGIS.
10. The Subcontractor is required to provide written notification to EXIGIS at least **30 days in advance** of any modification, change, or cancellation of any of the insurance coverage. Notification by an insurance company shall be in addition to, and shall not satisfy, the Subcontractor’s obligation to provide a written notification.
11. If a policy expires prior to completion of the work or expiration of the Subcontract, the Subcontractor will be required to submit a replacement Certificate of Insurance and endorsement(s) to EXIGIS.
12. The Certificate of Insurance and endorsement(s) will be retained on file and may apply to future LLNS Subcontracts and, therefore, it is preferred specific Subcontract numbers are not referenced.

# SAMPLE

<b>CERTIFICATE OF LIABILITY INSURANCE</b>		DATE (MM/DD/YY) [Date]
<b>PRODUCER</b> [Your Insurance Representative's Name and Address]	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
<b>INSURERS AFFORDING COVERAGE</b>		
<b>INSURED</b> [Your Company Name and Address]	INSURER A:	Your General Liability Insurance Company
	INSURER B:	Your Automobile Liability Insurance Company
	INSURER C:	Other Liability Insurance Company
	INSURER D:	
	INSURER E:	

## 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	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	<b>GENERAL LIABILITY</b>	XXXXX	06/01/06	06/01/07	EACH OCCURRENCE	(See I&I)
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire)	
	CLAIMS MADE	<input checked="" type="checkbox"/>	OCCUR		MED EXP (Any one person)	
					PERSONAL & ADV INJURY	\$1,000,000
					GENERAL AGGREGATE	(See I&I)
	GENL AGGREGATE LIMIT APPLIES PER:				PRODUCTS-COMP/OP AGG	(See I&I)
		POLICY	PROJECT	LOC		\$
B	<b>AUTOMOBILE LIABILITY</b>	XXXXX	06/01/06	06/01/07		
	<input checked="" type="checkbox"/> ANY AUTO				COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	ALL OWNED AUTOS				BODILY INJURY (Per person)	\$
	SCHEDULED AUTOS				BODILY INJURY (Per accident)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	<input checked="" type="checkbox"/> NON-OWNED AUTOS					
	<b>GARAGE LIABILITY</b>				AUTO ONLY-EA ACCIDENT	\$
	ANY AUTO				OTHER THAN EA ACC	\$
					AUTO ONLY: AGG	\$
	<b>EXCESS / UMBRELLA LIABILITY</b>				EACH OCCURRENCE	(See Item 4.)
	OCCUR		CLAIMS MADE		AGGREGATE	(See Item 4.)
	DEDUCTIBLE					\$
	RETENTION	\$				\$
A	<b>WORKERS' COMPENSATION AND EMPLOYER'S LIABILITY</b>	XXXXX	06/01/06	06/01/07	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	OTHER
					EL EACH ACCIDENT	\$1,000,000
					EL DISEASE-EA EMPLOYEE	\$1,000,000
					EL DISEASE-POLICY LIMIT	\$1,000,000
C	<b>OTHER</b>					

### DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

The general liability insurance is endorsed to name each of the certificate holders as an "additional insured." The general liability and workers' compensation insurance is endorsed to include a "waiver of subrogation" provision in favor of the certificate holders.

### CERTIFICATE HOLDER

Lawrence Livermore National Security, LLC and its members and affiliates and the U.S. Government  
 Lawrence Livermore National Laboratory  
 7000 East Avenue  
 Livermore, CA 94550

### CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL MAIL 30 DAYS WRITTEN NOTICE TO EXIGIS (See Item 10.).

AUTHORIZED REPRESENTATIVE