

METROPOLITAN TRANSIT SYSTEM  
AND SAN DIEGO AND ARIZONA EASTERN RAILWAY COMPANY

RIGHT OF ENTRY PERMIT  
INSURANCE REQUIREMENTS

1. INSURANCE

Prior to beginning work, Permittee shall have provided MTS with satisfactory certification by a properly qualified representative of the Insurer(s) that the Permittee's insurance complies with this section.

Permittee shall include the MTS Document number, if available, on all insurance-related correspondence, i.e., the insurance certificate itself. If the MTS Document number is not available, Permittee shall include location and type of work being performed, e.g., 30" waterline @ 69<sup>th</sup> Street & Imperial Ave Crossing.

Permittee shall name the following as the Certificate Holder:

Metropolitan Transit System  
1255 Imperial Avenue, Suite 1000  
San Diego, CA 92101

All policies required shall be issued by companies who are licensed to do business in the State of California and hold a current policyholder's alphabetic and financial-size category rating of not less than A-VI, in accordance with A.M. Best.

A. COVERAGE REQUIRED - ALL PERMITS

(1) Liability

(a) Commercial General Liability. At all times during this contract and, with respect to Products and Completed Operations Liability, for 12 months following the acceptance of the work by MTS, Permittee agrees to maintain Commercial General Liability Insurance for bodily injury and property damage in an occurrence form and with insurance companies acceptable to MTS. Commercial General Liability Insurance must include coverage for the following:

- Premises/Operations Liability
- Per Project Aggregate
- Products/Completed Operations Liability
- No Explosion, Collapse, and Underground (XCU) exclusion
- Contractual Liability, with respect to this agreement
- Personal Injury Liability
- Broad Form Property Damage
- Independent Contractors

All such policies shall name in the endorsement as additional insureds the following entities including their directors, officers, agents, and employees as their interests may appear:

- San Diego Metropolitan Transit System (MTS),
- San Diego Trolley, Inc. (SDTI),
- San Diego and Arizona Eastern Railway (SD&AE),
- San Diego and Imperial Valley Railroad (SD&IV), and
- San Diego Transit Corporation (SDTC)

- (b) Automobile Liability. At all times during this contract, Permittee agrees to maintain Automobile Liability Insurance for bodily injury and property damage including coverage for all owned, non-owned, and hired vehicles.
- (c) Workers' Compensation/Employer Liability. At all times during this contract, Permittee agrees to maintain Workers' Compensation and Employers' Liability Insurance in compliance with the applicable statutory requirements.

B. ADDITIONAL COVERAGES REQUIRED (AS INDICATED)



(1) Railroad Protective or Equivalent  
REQUIRED

Any exclusions relating to performance of operations within the vicinity of any railroad, bridge, trestle, track, roadbed, tunnel, underpass, or crossing must be deleted. Option: purchase separate Railroad Protective Liability Policy as required.



(2) Pollution Liability  
REQUIRED

At all times during this contract, and for 24 months following, Permittee agrees to maintain Pollution Legal Liability Insurance with respect to services or operations under this agreement. The extended discovery period must be no less than 24 months.



(3) Primary and Non-Contributory Insurance  
REQUIRED

Permittee agrees that all general liability coverages required under this insurance section are PRIMARY insurance and that any insurance of MTS, SDTI, SD&AE, SD&IV, and SDTC shall be excess and noncontributory (endorsement required).

C. MINIMUM POLICY LIMITS REQUIRED

Combined Single  
Limit (CSL)

---

Commercial General Liability (Per Occurrence)	\$1,000,000
General Aggregate	\$2,000,000
Completed Operations & Products Aggregate	\$2,000,000
Automobile Liability	\$1,000,000
Worker's Compensation Employer's Liability	\$1,000,000

Additional Coverages (as indicated under Section B, Additional Coverages Required):

<input checked="" type="checkbox"/> B (1) Railroad Protective	\$1,000,000
<input type="checkbox"/> B (2) Pollution Liability	\$

D. POLICY PROVISION REQUIRED

All policies and coverages shall contain a provision for 30 days written notice by the Insurer(s) to MTS Contracts Specialist of any cancellation or material reduction of coverage. A ten-day notice is required for non-payment of premium.

E. SPECIAL PROVISIONS

The foregoing requirements as to the types and limits of insurance coverage to be maintained by Permittee, and any approval of said insurance by MTS, SDTI, SD&AE, SD&IV, and SDTC, or their insurance Contractor(s) are not intended to and shall not in any manner limit or qualify the liabilities and obligations otherwise assumed by Permittee pursuant to this agreement, including but not limited to the provisions concerning indemnification.

MTS reserves the right to stop Permittee work in the event of material noncompliance with the insurance requirements outlined above.

<b>ACORD™ CERTIFICATE OF LIABILITY INSURANCE</b>		DATE (MM/DD/YYYY) <b>Current</b>
PRODUCER <b>Name</b> <b>Address</b> <b>Address Continued</b> <b>Phone Number</b>	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.	
INSURED <b>Contract Holder Name</b> <b>Address</b> <b>Address Continued</b> <b>Phone Number</b>	INSURERS AFFORDING COVERAGE INSURER A: <b>GL Insurance Company</b> INSURER B: <b>AL Insurance Company</b> INSURER C: <b>WC Insurance Company</b> INSURER D: <b>PL Insurance Company</b> INSURER E:	NAIC # 00000 00000 00000 00000

**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 ADD'L LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
<b>A</b>	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR _____ _____ GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	<b>Sample 00123</b>	<b>11/01/2007</b>	<b>11/01/2008</b>	EACH OCCURRENCE <b>\$1,000,000</b>
					DAMAGE TO RENTED PREMISES (Ea occurrence) \$
					MED EXP (Any one person) \$
					PERSONAL & ADV INJURY \$
		GENERAL AGGREGATE <b>\$2,000,000</b>			PRODUCTS - COMP/OP AGG <b>\$2,000,000</b>
<b>B</b>	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS _____ _____	<b>Sample 00456</b>	<b>11/01/2007</b>	<b>11/01/2008</b>	COMBINED SINGLE LIMIT (Ea accident) <b>\$1,000,000</b>
					BODILY INJURY (Per person) \$
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE _____ _____ DEDUCTIBLE RETENTION \$				OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
	EACH OCCURRENCE \$ AGGREGATE \$ \$ \$				
<b>C</b>	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	<b>Sample 00789</b>	<b>11/01/2007</b>	<b>11/01/2008</b>	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
					E.L. EACH ACCIDENT <b>\$1,000,000</b>
					E.L. DISEASE - EA EMPLOYEE <b>\$1,000,000</b>
					E.L. DISEASE - POLICY LIMIT <b>\$1,000,000</b>
<b>D</b>	OTHER Professional Liability	<b>Sample 12345</b>	<b>11/01/2007</b>	<b>11/01/2008</b>	<b>2,000,000 Limit</b> <b>Replacement Cost</b>

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

**Re: Contract Number(s) : G0001.0-08**  
**With respect to General Liability and Automobile Liability, San Diego Metropolitan Transit System (MTS), San Diego Trolley Inc (SDTI), San Diego and Arizona Eastern Railway (SD&AE), San Diego and Imperial Valley Railroad (SD&IV) and San Diego Transit Corporation (See Attached Descriptions)**

<b>CERTIFICATE HOLDER</b>  Metropolitan Transit System  1255 Imperial Avenue, Suite 1000 San Diego, CA 92101-7490	<b>CANCELLATION Ten Day Notice for Non-Payment of Premium</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> 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 <b>Signature Required</b>
--	--

## **IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

## **DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

## DESCRIPTIONS (Continued from Page 1)

(SDTC), their directors, officers, agents, and employees are named as Certificate Holders and Additional Insured's as their interest may appear per the attached (CG 20 10 11/85 or CG 1010, post 11/85, and CG 2037 or equivalent) endorsement(s). Coverage is Primary and Non Contributory with respect to General Liability and Automobile Liability.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - OWNERS, LESSEES or  
CONTRACTORS (FORM B)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:

San Diego Metropolitan Transit System (MTS), San Diego Trolley Inc (SDTI),  
San Diego and Arizona Eastern Railway (SD&AE), San Diego and Imperial Valley Railroad (SD&IV) and  
San Diego Transit Corporation (SDTC), their directors, officers, agents, and employees

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) 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 work" for that insured by or for you.

Re: Contract Number(s)

PRIMARY INSURANCE:

IT IS UNDERSTOOD AND AGREED THAT THIS INSURANCE IS PRIMARY  
AND ANY OTHER INSURANCE MAINTAINED BY THE ADDITIONAL INSURED  
SHALL BE EXCESS ONLY AND NOT CONTRIBUTING WITH THIS  
INSURANCE.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - OWNERS, LESSEES or  
CONTRACTORS FORM B**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:

San Diego Metropolitan Transit System (MTS), San Diego Trolley Inc (SDTI),  
San Diego and Arizona Eastern Railway (SD&AE), San Diego and Imperial Valley Railroad (SD&IV) and  
San Diego Transit Corporation (SDTC), their directors, officers, agents, and employees

(If no entry appears above, information required to complete this endorsement will be shown in the  
Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) 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.

Re: Contract Number(s)

PRIMARY INSURANCE:

IT IS UNDERSTOOD AND AGREED THAT THIS INSURANCE IS PRIMARY  
AND ANY OTHER INSURANCE MAINTAINED BY THE ADDITIONAL INSURED  
SHALL BE EXCESS ONLY AND NOT CONTRIBUTING WITH THIS  
INSURANCE.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### SCHEDULE

<p><b>Name of Person or Organization:</b>  San Diego Metropolitan Transit System (MTS), San Diego Trolley Inc (SDTI),  San Diego and Arizona Eastern Railway (SD&amp;AE), San Diego and Imperial Valley Railroad (SD&amp;IV) and  San Diego Transit Corporation (SDTC), their directors, officers, agents, and employees</p>
<p><b>Location And Description of Completed Operations:</b>  Re: Contract Number(s)</p>
<p><b>Additional Premium:</b></p>

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

**Section II - WHO IS 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 work" at the location designated and described in the schedule of this endorsement performed for that insured and included in the "products-completed operations hazard".

**PRIMARY INSURANCE:**

IT IS UNDERSTOOD AND AGREED THAT THIS INSURANCE IS PRIMARY AND ANY OTHER INSURANCE MAINTAINED BY THE ADDITIONAL INSURED SHALL BE EXCESS ONLY AND NOT CONTRIBUTING WITH THIS INSURANCE.

Policy Number: Sample 00456

Automobile Liability

This endorsement changes the policy. Please read it carefully.

**PRIMARY AND NON-CONTRIBUTORY**

This endorsement modifies insurance provided under the following:

AUTOMOBILE LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:

**San Diego Metropolitan Transit System (MTS),  
San Diego Trolley Inc (SDTI),  
San Diego and Arizona Eastern Railway (SD&AE),  
San Diego and Imperial Valley Railroad (SD&IV) and  
San Diego Transit Corporation (SDTC), their directors,  
officers, agents, and employees**

**Re: Contract Number (s)**

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement)

IT IS UNDERSTOOD AND AGREED THAT THIS INSURANCE IS PRIMARY AND ANY OTHER INSURANCE MAINTAINED BY THE METROPOLITAN TRANSIT SYSTEM SHALL BE EXCESS ONLY AND NOT CONTRIBUTING WITH THIS INSURANCE.

Form Number Required