# CERTIFICATE OF INSURANCE REQUIREMENTS Mount Washington

**Required Coverages** 

	required coverages
Commercial General Liability	\$1,000,000 per Occurrence and
(CGL):	\$2,000,000 Aggregate for Bodily Injury, Personal
	Injury, Property Damage, and Products/Completed
	Operations, and shall be written on a primary and
	non-contributory basis over any liability policy
	carried by OWNER, OWNER'S
	REPRESENTATIVE and PROPERTY MANAGER
	and include an endorsement clarifying such position
	if the base policy does not include equivalent
	language, for all claims or liabilities arising from, or
	incidental.
Commercial Automobile:	\$1,000,000 each occurrence Liability Insurance combined single limit for bodily injury and property damage. Evidence should indicate that liability coverage evidenced extends to both owned,
	hired, and non-owned vehicles.
Umbrella Liability:	\$5,000,000 Per Occurrence/\$5,000,000 Aggregate. Such insurance shall be in excess of all liability coverage required.
Worker's	\$1,000,000 Each Accident
Compensation/Employers	
Liability:	
Employee Dishonesty/Crime	\$1,000,000 per Occurrence
Employee Dishonesty/Crime	\$2,000,000 Aggregate
	Employee Dishonesty/Commercial Crime insurance
	including third party coverage, with limits in an
	amount of not less than the amount as listed above
	for all employees of Vendor who work at the
	Property. Said policy may be a blanket policy
	covering all employees of Vendor.
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Cyber Liability	\$1,000,000 per Occurrence
	\$2,000,000 Aggregate
	Comprehensive Cyber Liability coverage for claims
	involving the electronic theft or loss of personal identity
	information, credit or debit card information, banking
	information and other electronic data or online
	information with minimum limits in amounts not less than
	the amounts listed above. The coverage should extend to
	provide Network Security Liability, Privacy Liability,
	Event Management Insurance, Cyber Extortion, and
	Network Business Interruption.
Professional Liability	(Architects, Consultants and/or Engineers only):
Insurance Coverage:	If requested, \$2,000,000 or project dollar amount up
_	to \$25 million of project cost;
	\$3,000,000-\$5,000,000 or project dollar amount up
	to \$25-\$50 million project cost;
	\$5,000,000 or higher or project dollar amount over
	\$50 million project cost.
Fidelity Bond (which includes	Limits in an amount not less than the Dollar Amount
employee dishonesty	of the Project (Or other if agreed to by Owner) for all
coverage):	employees of Vendor.
	****This is <b>ONLY required</b> if Vendor is handling, managing,
	or processing of any of the project's monetary funds for
	OWNER or for Janitorial, Security or other like services where
	vendor is inside premises unsupervised during non-business
	hours. ***

# **Required Endorsements:**

Additional Insured Endorsement:	Additional Insured Endorsement or Blanket Endorsement to the <u>CGL</u> , <u>Auto and Umbrella Liability</u> policies should be provided in favor of Owner, Owner's Representative and Manager.
Waiver of Subrogation Endorsement:	Waiver of Subrogation Endorsement or Blanket Endorsement to the CGL, Worker's Compensation/ Employer's Liability and Umbrella Liability policies should be provided in favor of Owner, Owner's Representative and Manager.
Notice of Cancellation Clause:	Policies will include a cancellation clause providing that such insurance may not be cancelled, lapsed, reduced or materially changed without 30-days written notice to the Owner, Owner's Representative and Manager.
Primary, Non-contributory Provision	Provision needs to be included on the COI for <u>CGL</u> and Auto Liability.

# **Endorsements must read:**

"Mount Washington North Business Trust, Mount Washington South Business Trust, Johns Hopkins University and Transwestern Carey Winston L.L.C. d/b/a Transwestern are named as additionally insured in regard to premises located at 5801 and 6225 Smith Avenue, Baltimore, Maryland 21209. All rights of subrogation against Mount Washington North Business Trust, Mount Washington South Business Trust, Johns Hopkins University and Transwestern Carey Winston L.L.C. d/b/a Transwestern are hereby waived."

# Certificate Holder must read as follows:

Mt. Washington North Business Trust; Mt. Washington South Business Trust

C/O Transwestern Carey Winston. L.L.C.

5801 Smith Avenue, Suite 1100

Baltimore, MD 21209

#### Additional insured to be listed as follows:

- 1) Transwestern Carey Winston, L.L.C. d/b/a Transwestern
- 2) Mount Washington North Business Trust
- 3) Mount Washington South Business Trust
- 4) Johns Hopkins University

#### Email Address for COI:

# barbara.etzel@transwestern.com

Please address the originals to:

Mt. Washington North Business Trust Mt. Washington South Business Trust c/o Transwestern Carey Winston, L.L.C. 5801 Smith Avenue, Suite 1100 Baltimore, MD 21209

# All insurance carriers must have a minimum AM Best rating of A-:VII

Please forward a copy of these requirements to your Insurance Carrier so they have all the required information.

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