



Jacksonville Community Center

Facility Use Insurance Requirements and Samples

Thank you for choosing the **Jacksonville Community Center (JCC)** for your gathering! We look forward to providing a warm and welcoming experience for you and all of your guests.

Renters of events where the anticipated attendance exceeds 50 people are required to submit a Certificate of Liability Insurance in the amount of \$1,000,000 per occurrence and \$2,000,000 general aggregate for general liability coverage with an endorsement naming Jacksonville Community Center as additionally insured or provide the Blanket Additional Insured coverage form, if applicable.

If alcohol at the event, an endorsement naming Jacksonville Community Center as additionally insured with Host Liquor Liability included if **serving** alcoholic beverages or Liquor Legal Liability included if the alcohol will be **sold**, even as part of a meal package.

Some Insurance Ideas:

It is your responsibility as a renter to conduct your own research about your insurance options. However, below are some places to start your process. *Homeowner's Insurance*- Some homeowners' policies may offer coverage for an event or a special rider can be purchased to cover the event.

Below are two insurance options which are not endorsed by Jacksonville Community Center but are listed for informational purposes:

The Event Helper- Visit [The Event Helper](#) to search and get a quote. (See FAQ for more information)

Eventsured- Visit [Eventsured](#) to search and get a quote.

The following two insurance documents must be submitted at least 14 days prior to your event. If we do not receive the insurance documentation, your event will be canceled. We encourage you to provide these requirements and samples to your insurer.

1. Certificate (s) of Insurance
 - a. The Certificate of Insurance is a statement of coverage you have in place, but it does not extend coverage or any other rights to the Jacksonville Community Center or any other party.
 - b. If alcohol, Host Liquor Liability or Liquor Legal Liability must be included in section (5) "Other".
2. Additional Insured Endorsement
 - a. The Additional Insured Endorsement is a document that adds language to your policy to make the JCC an additional insured on your policy.
 - b. The Additional Insured Endorsement will not always list JCC. Some insurance companies include a "Blanket Additional Insured Endorsement" and this is required if applicable.

Certificate of Liability Checklist

Producer:

The “Producer” matches the name of your insurance provider or agency.

Insured:

The “Insured” matches the Event Representative's name as it appears on the rental agreement. The Event Representative is the party responsible for the event. Insurance from an entity other than the Event Representative is not a substitute for coverage for the event. Examples include party planners, caterers, or other vendors who provide event services but may not be responsible for the entire event.

General Liability:

“Occurrence” box is checked.

If serving alcohol, add Host Liquor Liability to the blank box and select the associated checkbox.

If selling alcohol, add Liquor Legal Liability to the blank box and select the associated checkbox.

Waiver of Subrogation:

Additional Insured:

“Additional Insured” box is checked.

Policy Effective and Expiration Dates:

The policy must be current and date(s) of the event fall within the “policy effective” and “policy expiration” dates.

Limits:

Minimum per occurrence limit \$1,000,000 each occurrence and \$2,000,000 general aggregate.

Host Liquor Liability or Legal Liability might be included in this section depending on the Producer.

Description of Operations: The name of the event, and date(s) to be held, are shown here.

Include the following: “JCC, its officers, employees, and volunteers are named as Additional Insured with respect to facility rental per attached ‘INCLUDE FORM NUMBER’”.

Certificate Holder:

Jacksonville Community Center
160 E. Main St
Jacksonville, OR 97530

Additional Insured Endorsement Checklist

A separate Additional Insured Endorsement page must be attached to the Certificate of Liability Insurance.

The endorsement page requirements include:

1. The General Liability policy number on the Additional Insured Endorsement matches the policy number on the Certificate of Liability insurance certificate.
2. “Jacksonville Community Center, its officers, employees, volunteers and agents” are listed as additional insured. This quoted language must be included as written and is not required if “Blanket Additional Insured” endorsement is included.
3. No restrictive wording is acceptable on the endorsement, other than to restrict the coverage to liability arising out of the operations of the named insured.

FAQ

1. *Is host liquor coverage included in my homeowner's policy?*
 - a. Yes, most homeowner's and commercial liability policies automatically include host liquor coverage. If alcohol is sold, Liquor Legal Liability coverage will still need to be purchased.
2. *If I'm using Event Helper, how do I add the Host Liquor for serving alcohol or Liquor Legal for selling alcohol?*
 - a. In the Event Helper, be sure to check the "Waiver of Subrogation" box in order to give the JCC the Additional Insured Endorsement. This is under section 2, "General Liability Coverage Options."
 - i. Check "Need Waiver of Subrogation".
 - ii. This is the section where you can also select "Host Liquor or Liquor Legal" coverage.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/23/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. 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).

PRODUCER Insurance Company providing coverage Insurance Company providing coverage Address		CONTACT NAME: Insurance Company providing coverage contact PHONE (A/C, No, Ext): 555-555-5555 FAX (A/C, No): E-MAIL ADDRESS:	
		INSURER(S) AFFORDING COVERAGE INSURER A: Insurance Company providing coverage NAIC # XXXXX INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
INSURED (541) 951-1519 Event Representative Name Event Representative Address			

COVERAGES

CERTIFICATE NUMBER: Cert ID 19176

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> HOST LIQUOR LIABILITY GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		XXXXXXXXXX	04/09/2021	04/09/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Host Liquor \$ Included
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
							\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder listed is named as Additional Insured, including Liquor Legal (or Host Liquor), per the attached endorsement _____ per Contract/Agreement and use of the Community Center for (Event Name & Number of Participants)

CERTIFICATE HOLDER

CANCELLATION

Jacksonville Community Center 160 E Main Jacksonville OR 97530	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – MANAGERS OR LESSORS OF PREMISES

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Designation Of Premises (Part Leased To You): As submitted to company and required by written contract.
Name Of Person(s) Or Organization(s) (Additional Insured): Jacksonville Community Center 160 East Main St Jacksonville, OR 97530
Additional Premium: Included

SAMPLE

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability arising out of the ownership, maintenance or use of that part of the premises leased to you and shown in the Schedule and subject to the following additional exclusions:

This insurance does not apply to:

1. Any "occurrence" which takes place after you cease to be a tenant in that premises.
2. Structural alterations, new construction or demolition operations performed by or on behalf of the person(s) or organization(s) shown in the Schedule.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and

2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
 2. Available under the applicable Limits of Insurance shown in the Declarations;
- whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations