# INSURANCE REQUIREMENTS FOR STREET AND SIDEWALK USE PERMITS CITY OF PORTLAND - OFFICE OF TRANSPORTATION - STREET SYSTEMS MANAGEMENT

This information will assist you and your insurance agent in complying with City insurance requirements for Street and Sidewalk Use permits.

#### The City of Portland Requires

A Standard Certificate of Liability Insurance, with the City of Portland named as the Certificate Holder.

Certificate Holder Address: City of Portland

Street Systems Management 1120 SW 5th Avenue, Room 825

Portland OR 97204

#### AND

- An endorsement, on file with the certificate, naming the City of Portland as an additional insured. List the endorsement used in the "DESCRIPTION OF OPERATIONS..." section of the certificate. The following endorsements are acceptable:
  - City of Portland Street and Sidewalk Use Permit Endorsement

OR

CG 20 12 07 98; "Additional Insured - State or Political Subdivisions – Permits"

OR

An endorsement equivalent to the CG 20 12 07 98 endorsement

#### Minimum Requirements for Liability Insurance

The insurance shall provide coverage not less than \$1,000,000 (one million dollars) per occurrence.

#### Regulations

The insurance certificate is intended to protect the public from any liability it may incur as a result of granting the requested permit.

#### **Notification of Cancellation**

The City of Portland requires 30 (thirty) days notice mailed from the insurance company prior to cancellation of the policy.

#### In the "DESCRIPTION OF OPERATIONS..." section of the certificate

- Indicate the type of permit being applied for (Street/Lane/Sidewalk Closure, Street Opening, Sewer Connection, Banner, Sidewalk Café, Vending Cart, Community Event, Block Party).
- If the insured seeks a permit for a set location/address or group of set locations/addresses that are different than the Insured's address on the certificate then the location(s) must be listed.
- If the insured continuously seeks permits for changing locations then do not list the permitted location/address, if you do we will require a new certificate for every new location. In this situation you may choose to indicate "All Operations".

#### **Submission**

Fax: 503-823-4554

Mail: Please mail to the Certificate Holder Address above

E-Mail: ssmi&b@pdxtrans.org

## THE CERTIFICATE AND ENDORSEMENT MUST BE APPROVED BY THE CITY ATTORNEY BEFORE A PERMIT CAN BE ISSUED. PLEASE ALLOW 6 BUSINESS DAYS FOR PROCESSING.

#### Questions

If you or your agent have any further questions, please call Street Systems Management at 503-823-7142 or send e-mail to <a href="mailto:ssmi&b@pdxtrans.org">ssmi&b@pdxtrans.org</a>

### City of Portland Street and Sidewalk Use Permit Endorsement This Form to be Attached to Permittee's Certificate of Insurance

INSURED:				
AFFORDING C	O:			
POLICY NUMB	ER:			
EFFECTIVE:				
The policy shall	bear also the	following endorser	nent:	
	"Without prejudice to coverage otherwise existing herein, the City of Portland, its officers, agents, and employees are included as additional insureds under this policy as to any claim or claims for injury to person including death, or damage to property, resulting from or growing out of the operations of the permittee within the City of Portland, Oregon."			
	"It is understood and agreed that this policy shall not terminate or be canceled without first giving thirty (30) days written notice of intention to terminate or to cancel said policy to the Office of the City Engineer, 1120 SW 5th Avenue, Room 825, Portland, Oregon 97204."			
	insured in the nothing hereir in the policy b liable if only or as to claims b policy complie	Notwithstanding the naming of additional insureds, the said policy shall protect each insured in the same manner as though a separate policy has been issued to each; but nothing herein shall operate to increase the insured's liability as set forth elsewhere in the policy beyond the amount or amounts for which the insured would have been liable if only one person or interest had been named as insured. The coverage applies as to claims between insureds on the policy. This endorsement assures that the policy complies with the terms and conditions of the named insured's permit with the City of Portland."		
Authorized Insu	rance Represe	entative Signature	•	
Date			<del>-</del>	
Name & Address of Certificate Holder:		Holder:	City of Portland Street Systems Management 1120 SW Fifth Avenue, Room 825 Portland, OR 97204	