

CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

PRODUCER	This is to certify to the BOARD OF TRUSTEES of Southern Illinois University that the following described policies and insurance coverage in force at this date has been issued.	
	COMPANIES AFFORDING COVERAGE	
	COMPANY LETTER A	
CODE	SUB-CODE	COMPANY LETTER B
INSURED	COMPANY LETTER C	
	COMPANY LETTER D	

COVERAGES

***Minimum Acceptable Limits: Employer's Liability Limit - \$500,000; Comprehensive General Liability - BI \$1,000,000; PD \$1,000,000. Comprehensive Automobile Liability - BI \$ 1,000,000. (SEE HOLD HARMLESS AGREEMENT ON THE FOLLOWING PAGE).**

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS	
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> OWNERS & CONTRACTOR'S PROT				GENERAL AGGREGATE	\$
					PRODUCTS-COMP/OPS AGGREGATE	\$
					PERSONAL & ADVERTISING INJURY	\$
					EACH OCCURRENCE	\$
					FIRE DAMAGE *(Any one fire)	\$
					MEDICAL EXPENSE (Any one person)	\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY				COMBINED SINGLE LIMIT	\$
					BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE	\$
	EXCESS LIABILITY <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE	AGGREGATE
	WORKERS COMPENSATION AND EMPLOYER'S LIABILITY <input type="checkbox"/> STATUTORY				EACH ACCIDENT	\$
					DISEASE-POLICY LIMIT	\$
					DISEASE-EACH EMPLOYEE	\$
	OTHER					\$

Please name Southern Illinois University Carbondale as additional insured for General Liability and Automobile Liability.

CERTIFICATE HOLDER	CANCELLATION
Board of Trustees of Southern Illinois University 113 Wakeland Hall MC 6813 1215 Douglas Drive Carbondale, IL 62901	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL MAIL ___ DAYS' MINIMUM WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT.</p> <p>_____</p> <p>Authorized Representative</p>

HOLD HARMLESS AGREEMENT

THE SUCCESSFUL BIDDER AGREES TO INDEMNIFY AND HOLD HARMLESS THE BOARD OF TRUSTEES OF SOUTHERN ILLINOIS UNIVERSITY, ITS OFFICERS, EMPLOYEES, AND AGENTS FROM AND AGAINST ANY AND ALL SUITS, CLAIMS, DEMANDS, AND LOSSES, INCLUDING REASONABLE ATTORNEYS' FEES, COSTS AND EXPENSES, BASED UPON, RESULTING FROM, OR ARISING OUT OF ANY INJURY TO ANY PERSON OR PERSONS OR ANY DAMAGE TO PROPERTY WHICH MAY OCCUR OR BE ALLEGED TO HAVE OCCURRED IN CONNECTION WITH THE WORK, MATERIALS, OR PRODUCTS WHICH ARE THE SUBJECT OF THE CONTRACT AND/OR PURCHASE ORDER.