

Golden Triangle Construction, Inc.

Subcontractor Insurance Coverage Supplemental Checklist and Certification

Subcontractor Name _____ Date of ACORD Certificate of Insurance _____

The ACORD Certificate of Liability Insurance For (25-S), which is completed to attest to the scope of your insurance coverage, only summarizes the various policies listed as to the limits and coverage's provided. If DOES NOT show restrictions, exclusions, or limitations of coverage, which may cause a material breach under the subcontract agreement. PLEASE HAVE YOUR INSURANCE REPRESENTATIVE MARK THIS FORM AS A SUPPLEMENT TO THE ACORD CERTIFICATE AS THE COVERAGE FOR THE EXPOSURE LISTED. COVERAGE IS DEEMED TO BE PROVIDED IF NOT EXCLUDED.

	COVERAGE DOES INCLUDE:	YES	NO
1	A Per Project Aggregate		
2	The General Contractor and its Owner/Client as Additional Insured to include completed operations through the statute of limitations		
3	Primary and Non-Contributory Wording		
4	Waiver of Subrogation in Favor of General Contractor for General Liability		
5	Waiver of Subrogation in Favor of General Contractor for Workers Compensation		
6	Defense Costs outside of Policy Limits		
7	Mold, Fungus, Microorganisms		
8	Exterior Insulation and Finish Systems (EIFS)		
9	Subsidence (Required for Grading, Excavation, Utility, Asphalt Paving, Retaining Wall, HVAC, Plumbing and Electrical)		
10	Residential or Multifamily		
11	Contractual Coverage, Indemnification and/or Hold Harmless		
12	Damage to Work Performed by the Insured's Subcontractors		
13	Jobsite Pollution (for Building Demolition, Excavation, Site Utilities, Asphalt Paving, Pre-cast Concrete, Tilt-up Concrete, Plumbing, HVAC		
14	Errors and Omissions (Required for Layout and Survey, Precast and Fire Sprinkler Subcontractors -- and Plumbing & HVAC subcontracts that include Design/Build .)		

Signature of Agent _____ Date _____

Insurance Company or Agency Name _____

Please return completed form via fax: 303-776-7501 -- OR -- e-mail: accounting@gtc1.net