

**EXHIBIT E**

**STANDARDIZED INSURANCE REQUIREMENTS  
OF THE CITY OF POMPANO BEACH**

Insurance

The vendor shall not commence operations, labor, construction and/or installation of improvements to complete this project until certification or proof of insurance, detailing terms and provisions of coverage, has been received and approved by the City of Pompano Beach Risk Management Division.

The following insurance coverage shall be required.

- A. Workers' Compensation Insurance for all its employees in accordance with the requirements of Florida Statute, Chapter 440. The LICENSEE further agrees to be responsible for employment, control and conduct of its employees and for any injury sustained by such employees in the course of their employment.
- B. Public Liability & Auto Liability Insurance
  - 1) Naming the City of Pompano Beach as an additional insured in connection with the work being done under this Agreement.
  - 2) The types of insurance and minimum policy limits that are required are indicated by "XXXX" below.

**LIMITS OF LIABILITY**

Type of Insurance	each occurrence	aggregate
<b>PUBLIC LIABILITY</b>		
XXXX comprehensive form		
XXXX premises - operations	Bodily Injury ..... \$1,000,000.	\$1,000,000.
_____ explosion & collapse hazard	Property Damage ..... \$1,000,000.	\$1,000,000.
_____ underground hazard	-- or --	
XXXX products (if items are sold)	Bodily Injury and	
XXXX contractual insurance	Property Damage	
_____ liquor legal (if items are sold)	Combined ..... \$1,000,000.	\$1,000,000.
XXXX independent contractors		
XXXX Personal injury	Personal Injury ..... \$1,000,000.	\$1,000,000.
XXXX broad form		

## AUTOMOBILE LIABILITY

		Bodily Injury (each person) .....	\$1,000,000.	
		Bodily Injury (each accident) .....	\$1,000,000.	\$1,000,000.
XXXX	comprehensive form	Property Damage .....	\$1,000,000.	\$1,000,000.
_____	owned	-- or -- Bodily Injury and		
_____	Hired	Property Damage combined	\$1,000,000.	\$1,000,000.
_____	Non-owned			

## EXCESS LIABILITY

		Bodily injury and Property damage		
_____	Umbrella form	Combined .....	\$2,000,000.	\$2,000,000.
_____	other than umbrella			

The certification or proof of insurance must contain a provision for notification to the City thirty (30) days in advance of any material change in coverage or cancellation.

Firm shall furnish to the City the certification or proof of insurance required by the provisions set forth above, within five (5) days after notification of award of Agreement.

Mail certificate(s) to: City of Pompano Beach, Attention Risk Manager, P.O. Box 1300, Pompano Beach, Florida, 33061.