



Insurance Certificate



INSURANCE RIDER/CERTIFICATE SHALL READ AS FOLLOWS

Shall provide insurance in the following amounts:

- Bodily injury (\$1,000,000)
- Property damage (\$1,000,000)
- Workers Compensation (\$1,000,000)
- Vehicle Liability (\$1,000,000) (If vehicle is used)

RIVERSIDE COUNTY REGIONAL PARK & OPEN-SPACE DISTRICT with a certificate of insurance evidencing such coverage.

The certificate shall name the following as additional insureds:

Policy shall name the DISTRICT, County of Riverside, its Agencies, Districts, Special Districts, and Departments, their respective directors, officers, Board of Supervisors, employees, elected or appointed officials, agents or representatives as Additional Insureds.

The certificate must state that the insurance will not be canceled or reduced without 30 days prior written notice to Riverside County Regional Park & Open-Space District.

THE INSURANCE CERTIFICATE MUST BE FAXED OR MAILED 7 to 10 DAYS PRIOR TO THE EVENT TO THE FAX NUMBER OR ADDRESS BELOW:

Riverside County Regional Park and Open-Space District
Attention: Eric Boor
Email eboor@rivco.org
4600 Crestmore Road
Riverside, CA 92509
OFFICE (951)955-4310
FAX (951)955-4796

A COPY OF THE INSURANCE CERTIFICATE MUST BE IN YOUR POSSESSION IN ORDER TO PRESENT TO THE PARK ON THE DATE OF YOUR EVENT.