

Insurance Type	Description
Type A	Type A - contractors would be those who are considered to be routine in nature posing the lowest risk to the business. Typically these contractors are performing services which are not specific to our business, but general in nature. Examples of these types of contractors would include: landscaping, vending machine delivery, office supply deliveries, housekeeping/janitorial, bottle water delivery.
Type B	Type B - contractors would include those who will be coming on site to complete construction work, as well as those delivering raw materials, goods or equipment related to our business. These contractors would also include installation, repair, or maintenance of equipment. Examples of these type of contractors would include: general contractors, roofers, electricians, equipment technicians (related to production equipment) delivery of bulk non hazardous material (i.e. sand), purchase of machinery without install and heavy equipment operators (i.e. cranes, bulldozers, etc.)
Type C	Type C - contractors is an all-inclusive category including any services provider where there is an environmental risk posed to the business whether by cleaning, remediation, abatement, removal, disposal, storage or transportation of a hazardous substances. If there is any question regarding if the work conducted qualifies under this class, EHS and Risk Management need to be consulted. Examples of this would include: contractors providing onsite cleanup from an environmental event, hauling and disposal of chemicals/waste oil.
Type D	Type D - contractors include anyone providing professional services. Professional services can be further defined as involving an occupation or employment involving specialized knowledge, skill or expertise, where such labor, skill or expertise is predominantly mental or intellectual. This would generally include any consultants, engineers, architects, financial consultants, HR consultants, and IT/computer professionals. It is important to keep this in mind when dealing with larger construction projects, which could involve the use of these services in conjunction with the general contractor managing the project, professional insurance requirements should be included.
Type E	All engagements with Type E contractors/vendors/consultants providing the following need to be reviewed by Risk Management: a) work on any navigable waterway (i.e. river, lake, ocean) b) any projects in excess of \$2 million dollars c) access to Saint-Gobain network/computer systems, access or handling of confidential data including, but not limited to corporate, personally identifiable information or health information d) marketing consultants, including but not limited to those who will publish advertisements intended to be circulated through direct mailing that make any reference to anything financial (price, discounts, etc.) e) any service which poses a significant risk to the facilities production process f) drone or other aircraft use (helicopter, plane, hot air balloon) g) access to or handling of Saint-Gobain financial instruments (i.e. cash disbursement, investment management) or precious materials

	REQUIRED COVERAGE AND LIMITS FOR CONTRACTORS / VENDORS / SERVICE PROVIDERS DOING BUSINESS WITH SAINT-GOBAIN				
Insurance	Type A	Type B	Type C	Type D	Type E
Workers' Compensation (WC)	Statutory	Statutory	Statutory	Statutory	See Definitions Tab
Employer's Liability (EL)	\$1 Million per accident / employee	\$1 Million per accident / employee	\$1 Million per accident / employee	\$1 Million per accident / employee	See Definitions Tab
Commercial General Liability (CGL)	\$1 Million per occurrence	\$1 Million per occurrence	\$1 Million per occurrence	\$1 Million per occurrence	See Definitions Tab
Umbrella Liability (covering at least EL, CGL and AL)	N/A	\$4 Million per occurrence	\$4 Million per occurrence	\$4 Million per occurrence	See Definitions Tab
Automobile Liability (AL)	\$1 Million per occurrence	\$1 Million per occurrence	\$1 Million per occurrence	\$1 Million per occurrence	See Definitions Tab
Professional Liability \ Errors & Omissions (E&O)	N/A	N/A	N/A	\$5 Million per claim	See Definitions Tab
Pollution Legal Liability	N/A	N/A	\$5 Million per occurrence	N/A	See Definitions Tab
"Saint-Gobain Corporation" and "subsidiary legal entity" as an additional insured (all policies except WC and E&O)	YES	YES	YES	YES	See Definitions Tab
Waiver of Subrogation in favor of "Saint-Gobain Corporation" and "subsidiary legal entity" (except for E&O)	YES	YES	YES	YES	See Definitions Tab
30-day Cancellation Notice	YES	YES	YES	YES	See Definitions Tab
No less than A- A.M. Best rated Insurance Company	YES	YES	YES	YES	See Definitions Tab

CERTIFICATE OF LIABILITY INSURANCE

Please review the template COI with the explanations below to make sure you understand all insurance requirements that are being asked of you for your contract/agreement or project. Your firm cannot be approved until your COI meets the specified requirements.

A	"A" is the date the COI is issued. This must be during the policy effective period specified in "G"	
B	"B" lists the name and address of the insurance broker or insurance company issuing the COI. This corresponds with the "authorized representative" whose signature appears in "N"	
C	"C" is the name and address of the insured. The "insured" MUST be the same as the name of the Contractor firm on the contract or purchase order.	
D	"D" lists the insurance company(ies) that have or will issue the various policies being provided. The insurance companies listed in "D" must correspond with those indicated in "E" as well as the policy numbers identified.	
E	"E" matches the insurance companies providing the various lines of coverage, with those identified in "D". There could be one company listed, and they would all be marked A. Or there could be a different company for each line of coverage.	
F	"F" shows where each policy names the certificate holder identified in "P" as an additional insured (1st column) and as having a waiver of subrogation in its favor (2nd column). These columns must both be checked with a "Y" (yes) for any commercial general liability, aggregate liability, umbrella liability, auto liability, or liquor liability. This will NOT apply to Workers' Comp.	
G	"G" indicated the effective date and expiration date of each policy. The date of the project MUST be included within the effective period of the policy.	
H	"H" indicates the limits for commercial general liability coverage for each occurrence under the policy. For most projects, the general liability coverage must be at least \$1M per occurrence.	
I	"I" indicates the general aggregate limit of the general liability policy. For most projects, the general liability aggregate must be at least \$2M.	
J	"J" indicates the policy reaction to a general liability claim. The box for "Commercial General Liability" should always be checked. And the box for "occur" (which means policy applies per occurrence) should always be checked. Saint-Gobain will not accept claims-made policies.	
K	"K" indicates how the aggregate limits of the policy apply to a claim. Saint-Gobain may accept aggregate limits for a contract/agreement or project on a policy basis. This can be accomplished in one of two ways: 1) Applicant can check the "POLICY" box and note the GENERAL AGGRIGATE amount. Saint-Gobain will not accept the aggregate limit on a "policy" basis unless an umbrella policy is included, which provides a minimum of an additional \$4M in coverage per contract/agreement or project. Saint-Gobain will not accept the aggregate limit on a "policy" basis for multiple projects except in very limited circumstances where the GL and the Umbrella being provided exceed \$10M."project", or 2) The Policy can be written just for a project, which means the policies effective dates would begin and end. Any/all considerations related to aggregation amounts must be reviewed by SGNA Risk Management.	
L	"L" indicates the automobile liability limits. If your contract/agreement or project will have any vehicles participating within the plant premisses/property, you must provide at least \$1M in auto liability coverage. The type of coverage (specified within the Type of Insurance for Automobile Liability area "M") will vary depending on the nature of the autos being utilized.	
M	"M" indicates how the auto policy applies. Saint-Gobain requests that the "any auto" box be checked. In limited circumstances Saint-Gobain will allow for other boxes to be checked depending on the specifics of the contract/agreement or project.	
N	"N" indicates the amount of Pollution or Professionals liability coverage for a contract or project. Increased General Liability may not be acceptable depending on the contract/agreement or project. General Liability limits are typically calculated separately from Pollution and Professional liability. Situations requiring Type E contractors or projects >\$2M SGNA Risk Management must be consulted.	
O	"O" is a space provided for description and limitations regarding a contract or project. This is also where a broker may choose to indicate that the "certificate holder shall be an additional insured" or that a "waiver of subrogation is provided in favor of the certificate holder." If the insurance broker fails to use the checkboxes in "F" then the description must also state for which policies the additional insured and waiver of subrogation applies. Simply stating it is not sufficient. (ie, the certificate holder shall be an additional insured and a waiver of subrogation applied in its favor for the general liability policy, the umbrella policy, the auto policy and the liquor liability policy.) Saint-Gobain Corporation and its subsidiaries and an Additional Insured on the General Liability, Automobile Liability, Excess/Umbrella Liability and Pollution Liability polies. A Waiver of Subrogation in favor of Saint-Gobain Corporation and its subsidiaries is provided on the General Liability, Automobility, Excess/Umbrella, Workers' Compensation and Pollution Liability polies.	
P	"P" indicates the Certificate Holder – which should ALWAYS be "Saint-Gobain Corporation and its affiliates c/o Safety Plus 3725 Airport Blvd. Suite 208-B, Mobile, AL 36608"	
Q	"Q" is the signature of the authorized representative from the brokerage company or insurance company indicated in "B". The COI must be signed in order to be valid.	



CERTIFICATE OF LIABILITY INSURANCE

A

DATE (MM/DD/YYYY)

Certificate Issue Date

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER < NAME OF PRODUCER > < ADDRESS OF PRODUCER > < CITY, STATE, POSTAL CODE >	B	CONTACT NAME: < INSURANCE AGENT NAME > PHONE (A/C, No, Ext): < INSURANCE AGENT PHONE # > FAX (A/C, No): E-MAIL ADDRESS: < INSURANCE AGENT E-MAIL >																			
		<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: < MUST BE RATED A- OR ABOVE BY AM BEST ></td> <td colspan="2">PROVIDE</td> </tr> <tr> <td>INSURER B:</td> <td colspan="2"></td> </tr> <tr> <td>INSURER C:</td> <td colspan="2">D</td> </tr> <tr> <td>INSURER D:</td> <td colspan="2"></td> </tr> <tr> <td>INSURER E:</td> <td colspan="2"></td> </tr> <tr> <td>INSURER F:</td> <td colspan="2"></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A: < MUST BE RATED A- OR ABOVE BY AM BEST >	PROVIDE		INSURER B:			INSURER C:	D		INSURER D:			INSURER E:			INSURER F:
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COVERAGES

CERTIFICATE NUMBER: 1

REVISION NUMBER: 1

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	< VALID POLICY NUMBER >	Policy Effective Date	Policy Expiry Date	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	J	F	G	H	I	L	
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	< VALID POLICY NUMBER >	Policy Effective Date	Policy Expiry Date	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
E	K	M					
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB OCCUR CLAIMS-MADE DED RETENTION \$	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	< VALID POLICY NUMBER >	Policy Effective Date	Policy Expiry Date	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/>	<input checked="" type="checkbox"/>	< VALID POLICY NUMBER >	Policy Effective Date	Policy Expiry Date	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input checked="" type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Pollution Liability (if required) Professional Liability (if required)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	< VALID POLICY NUMBER >	Policy Effective Date	Policy Expiry Date	Per Occurrence: \$5,000,000 Per Occurrence: \$5,000,000 (only if required or for Type C, D, or E contractors)
O	N						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Saint-Gobain Corporation and its subsidiaries is included as an Additional Insured on the General Liability, Automobile Liability, Excess/Umbrella Liability and Pollution Liability policies. A Waiver of Subrogation in favor of Saint-Gobain Corporation and its subsidiaries is provided on the General Liability, Automobile Liability, Excess/Umbrella Liability, Workers' Compensation and Pollution Liability policies.

CERTIFICATE HOLDER

Saint-Gobain Corporation and its affiliates
 c/o Safety Plus, Inc.
 3725 Airport Blvd.
 Suite 208-B
 Mobile, AL 36608

P**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Q

< NAME OF AUTHORIZED REPRESENTATIVE & SIGNATURE >