

**AUTOMOBILE LIABILITY SPECIAL ENDORSEMENT
FOR THE SAN DIEGO COUNTY WATER AUTHORITY**

FORM AUT2013/08

Endorsement No.:

Issue Date (MM/DD/YY):

PRODUCER

Company:
Address:

Telephone:

POLICY INFORMATION

Insurance Company:
NAIC Code:
Policy No.:
Policy Period (from): (to):
Deductible of \$
Self-Insured Retention of \$

NAMED INSURED

Company:
Address:

APPLICABILITY

This insurance pertains to the operations and/or activities of the Named Insured under all written contracts/agreements in force with the San Diego County Water Authority.

TYPE OF INSURANCE

- BUSINESS AUTO POLICY
- TRUCKERS AND MOTOR CARRIER LIABILITY POLICY
- GARAGEKEEPERS LIABILITY
- NON-OWNED – HIRED VEHICLES
- OTHER:

OTHER PROVISIONS

LIABILITY LIMIT

\$ per accident, for bodily injury and property damage liability.

CLAIMS Representative for claims pursuant to this insurance

Name:
Company:
Address:

Telephone:

In consideration of the premium charged and notwithstanding any inconsistent statement in the policy to which this endorsement is attached or any endorsement now or hereafter attached thereto, it is agreed as follows:

1. **SCOPE OF COVERAGE.** This endorsement shall afford coverage at least as broad as Insurance Services Office form number CA0001, Code 1 ("any auto").
2. **CONTRIBUTION NOT REQUIRED.** This insurance shall be primary. Any other insurance or self-insurance available to the insureds added by this endorsement shall be in excess of and shall not contribute with this insurance.
3. **SEVERABILITY OF INTEREST.** This insurance applies separately to each insured against whom claim is made or suit is brought except with respect to the company's limits of liability. The inclusion of any person or organization as an insured shall not affect any right which such person or organization would have as a claimant if not so included.
4. **CANCELLATION NOTICE.** With respect to the interests of the San Diego County Water Authority, this insurance shall not be canceled or materially reduced in coverage except after thirty (30) days prior written notice has been given to the San Diego County Water Authority at address indicated below. (Except 10 days shall be allowed for non-payment of premium.)
5. **PROVISIONS REGARDING THE INSURED'S DUTIES.** Any failure by the Named Insured to comply with reporting provisions of the policy or breaches or violations of warranties shall not affect coverage provided to the insureds added by this endorsement.

Except as stated above, nothing herein shall be held to waive, alter or extend any of the limits, conditions, agreements or exclusions of the policy to which this endorsement is attached.

ENDORSEMENT HOLDER/ ADDITIONAL INSURED

SAN DIEGO COUNTY WATER AUTHORITY
4677 OVERLAND AVENUE
SAN DIEGO, CA 92123
858-522-6650

Project:

AUTHORIZED REPRESENTATIVE

I _____, warrant that I have authority to bind the above-mentioned insurance company and by my signature hereon do so bind this company to this endorsement.

Title:
Employer of Signatory:
Telephone: Date signed:

Signature: _____