

Joe Fiorelli

Director of Risk Management and Insurance

Enterprise Risk Management





What's the Plan?

- 1. Common Commercial Insurance Policies
- 2. Purpose and Process of Tracking Certificates of Insurance
- 3. ACORD 25 Form
- 4. Minimum Insurance Coverage Requirements
- 5. Spot the Deficiency



Learning Objectives

- 1. Types of Insurance Businesses Carry
- 2. Why Track Insurance
- 3. Limitations of a Col
- 4. How to Interpret a Col
- 5. How to Spot Col Deficiencies





Vocabulary

Col: Certificate of Insurance

Insured: Entity that purchases and benefits from the

insurance

Additional Insured: Third party that also benefits from the

insurance

Liability Insurance: Insurance for damages to third parties

Endorsement: Written change to an insurance policy



Commercial Insurance: 101



General Liability

Bodily Injury

Property Damage

Personal Injury

Advertising Injury



Automobile Liability





Commercial Insurance: 101



Excess/Umbrella Liability

Per Occurrence v. Aggregate



INSURANCE NERD ALERT



Workers' Compensation and Employer's Liability





Common Col Questions

What is a Certificate of Insurance (CoI)?

How do businesses track Cols?

What's the purpose of a Col?

Why do we collect insurance information?

Who completes a Col?

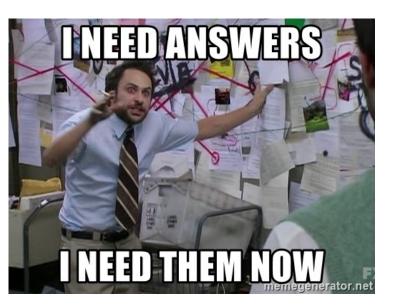
When do we receive Cols?

How do we receive Cols?

Who receives and tracks Cols?

How many Cols do we track and receive?







Limitations of Cols

- 1. Does not show what is or is not covered
- 2. Snapshot in time
- 3. "For informational purposes only"
- 4. Logistical headaches







ACORD 25 Form

ACORD CERTIFICATE OF L				(MMIDDAYYY)
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION O CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AME BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONST REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER	ND, EXTEND OR ALT TUTE A CONTRACT L.	TER THE COVERAGE AFFORDS BETWEEN THE ISSUING INSU	ED BY TH RER(S), A	E POLICIES UTHORIZED
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, t If SUBROGATION IS WAIVED, subject to the terms and conditions of this certificate does not confer rights to the certificate holder in lieu of	f the policy, certain p	policies may require an endorse		
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	PHONE (A/C, No. Ext):	FAX (A/C	Not:	
	E-MAIL ADDRESS:			
		NSURER(S) AFFORDING COVERAGE		NAIC #
INSURED	INSURER A:			
	INSURER C:			
	INSURER D :			
	INSURER E :			
	INSURER F:			
COVERAGES CERTIFICATE NUMBER:		REVISION NUMBE		
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ACORD 25 (2016/03) The ACORD name and log		988-2016 ACORD CORPORATION	ON. All rig	hts reserve

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ACORD 25 Form

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ACORD 25 Form

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		OWNED AUTOS ONLY	SCHEDULED						BODILY INJURY (Per accident)	\$
		HIRED AUTOS ONLY	NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
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Minimum Insurance Requirements

Coverage	Low Risk Profile	Medium Risk Profile (Standard)	<u>High</u> Risk Profile
Type of Contract	Contracts that are very small in dollar value (<\$5,000) and/or present very little risk to people/property (e.g. minor landscaping, small service jobs)	[Most contracts will fall here] Contracts that are medium in dollar value (\$5,000 - \$1,000,000) and present a medium level of risk to people/property	High Value Contracts (+\$1,000,000 and/or present a high level of risk to people/property (e.g. hazardous waste removal, GCs on major construction projects, engineers, architects, fireworks displays)
Commercial General Liability	\$500,000 Combined Single Limit (CSL) per occurrence	\$1,000,000	\$1,000,000
Products/Completed Operation Explosion, Collapse & Underground (XCU)			
Automobile Liability	\$500,000 CSL per occurrence	\$1,000,000	\$1,000,000
Umbrella Liability	n/a	\$1,000,000 (OK to waive if CGL occurrence limit is \$2,000,000 or more)	\$2,000,000
**Workers' Compensation	Statutory	Statutory	Statutory
**Employers Liability	\$100k/\$500k/\$100k	\$500k/\$500k/\$500k	\$500k/\$500k/\$500k
**Waiver of Subrogation on WC	Required if available	Required if available	Required
Professional Liability may be required on a risk profile depending on nature of services provided by contract (e.g.	If specifically required by the contract	If specifically required by the contract	If specifically required by the contract
Environmental/Pollution Liability required if demolition, use of hazardous materials or environmentally sensitive	n/a	n/a	If specifically required by the contract



Minimum Insurance Requirements

ACORD CERTIFICATE OF LIABIL		+	University of North Carolina-Charlotte	Minimum Insura	nnce Coverage Requirements	September 2022
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AM CERTIFICATE DOES NOT AFFIRMATURELY OR NEGATIVELY AMEND. EXT BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy if SUBROGATION IS WAIVED, subject to the terms and conditions of the pot his certificate does not conferrights to the certificate holder in lieu of such experiments.	END OR ALTER THE COVERAGE AFFORDED BY THE POLICIES CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED Ly(ies) must have ADDITIONAL INSURED provisions or be endorsed. Iliey, certain policies may require an endorsement. A statement on		Coverage	Low Risk Profile	Medium Risk Profile (Standard)	High Risk Profile
PRODUCER COAT PRODUCER RESULTANT INSURED INS	TAX. REFERENCE MERITERER SAFFORDING COVERAGE MERITER SAFFORDING COVERAGE MERITERER SAFFOR		Type of Contract	Contracts that are very small in dollar value (<\$5,000) and/or present very little risk to people/property (e.g. minor landscaping, small service jobs)	[Most contracts will fall here] Contracts that are medium in dollar value (\$5,000 - \$1,000,000) and present a medium level of risk to people/property	High Value Contracts (+\$1,000,000) and/or present a high level of risk to people/property (e.g. hazardous waste removal, GCs on major construction projects, engineers, architects, fireworks displays)
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BE INDICATED. NOTWITHSTANDIS ANY REQUIREMENT, TEMPOR CONDITION OF A CERTIFICATE MAY BE SIGNED OF MAY PERTAIN, THE INSURANCE AFFORDED SECURIOR OF A CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN THE PROPERTY OF	EEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD NAY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS Y THE POLICIES DESCRIPED HEREIN IS SUBJECT TO ALL THE TERMS		Commercial General Liability	\$500,000 Combined Single Limit (CSL) per occurrence	\$1,000,000	\$1,000,000
OCHMEROLA GENERAL LABILITY CLAMB-MADE OCCUR GENL AGGREGATE LIMIT APPLES PER: POLICY FEET LOC OTHERS	BACH OCCURRENCE \$ DAILAGE TO REPORT \$ PASSINGE (B) ACCURRENCE \$ MID DOP (My one person) \$ PERSONAL A ADVI NAURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMPOP AGG \$ PRODUCTS - COMPOP AGG \$		Products/Completed Operation Explosion, Collapse & Underground (XCU)			
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UMRRELIA LIAB OCCUR EXCESS LIAB CLAMM-MAGE DED RETENTIONS	BACH COCURRENCE S AGGREGATE S 5		Umbrella Liability	n/a	\$1,000,000 (OK to waive if CGL occurrence limit is \$2,000,000 or more)	\$2,000,000
WORKERS COMPRISATION AND EMPLOYERS LIABILITY ANYPROPRETOR PATTLE PROCEDUTIVE OFFICE ANNUAL REPORT OF THE PROPERTOR OF THE PRO	PSTATUTE OTH EL. EACH ACCIDENT 5 EL. DISEASE - EA EMPLOYEE 5 EL. DISEASE - FOLOY UNINT 5		**Workers' Compensation	Statutory	Statutory	Statutory
			**Employers Liability	\$100k/\$500k/\$100k	\$500k/\$500k/\$500k	\$500k/\$500k/\$500k
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, ma)	y be attached if more space is required)		**Waiver of Subrogation on WC	Required if available	Required if available	Required
CERTIFICATE HOLDER CAI	NCELLATION		Professional Liability may be required on a risk profile depending on nature of services provided by contract (e.g.	If specifically required by the contract	If specifically required by the contract	If specifically required by the contract
Th AC	HOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE HE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN COCROBACKE WITH THE POLICY PROVISIONS.		Environmental/Pollution Liability required if demolition, use of hazardous materials or environmentally sensitive	n/a	n/a	If specifically required by the contract
ACORD 25 (2016/03) The ACORD name and logo are req	© 1988-2016 ACORD CORPORATION. All rights reserved. gistered marks of ACORD					



Client#: 216019 20MCKIMCRE DATE (MM/DD/YYYY) ACORD... CERTIFICATE OF LIABILITY INSURANCE 8/24/2022 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(les) must have ADDITIONAL INSURED provisions or 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 any rights to the certificate holder in lieu of such endorsement(s). NC Certificate Team McGriff Insurance Services PHONE (AJC, No. EXI): 919 281-4500 PAX No. 8887468761 Post Office Box 13941 MAIL NCCertificateTeam@McGriff.com Durham, NC 27709 INSURER(S) AFFORDING COVERAGE NAIC # 919 281-4500 INSURER A : Valley Forge Insurance Company 20508 MOURED INSURER B : Continental Insurance Company 35289 McKlm and Creed inc INSURER C : American Casualty Co of Reading PA 20427 1730 Varsity Dr Ste 500 INSURER C : Continental Casualty Company 20443 Raleigh, NC 27606-2689 INSURER 6 INSURER F COVERAGES CERTIFICATE NUMBER: 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 CONTRACTOR 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. POLICY NUMBER X COMMERCIAL GENERAL LIABILITY 7015339793 09/05/2022 09/05/2023 EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) CLAMSMADE X OCCUR s100,000 s15,000 MED EXP (Any one person) PERSONAL & ADV INJURY \$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PEH: GENERAL AGGREGATE s4,000,000 POLICY PRO- X LOC s4,000,000 PRODUCTS - COMPAND AGG OTHER: 09/05/2022 09/05/2023 COMBINED SINGLE CIMIT AUTOMOBILE LIABILITY 7015339776 \$1,000,000 X ANY AUTO BODILY MUNICHY (Per person) OWNED AUTOS ONLY SCHEDULED AUTOR BODILY INJURY (Per accident) S X NON-OWNED AUTOS ONLY PROPERTY DAMAGE (Per accident) X HITTOS ONLY B X UMBRELLA LIAB CUE701533980 09/05/2022 09/05/2023 EACH OCCURRENCE X OCCUR s10,000,000 EXCESS LIAB CLAIMS-MADE s10.000,000 AGGREGATE DED X RETENTION \$10000 09/05/2022 09/05/2023 X PER STATUTE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY WC715339762 AND EMPLOYERS' LIABILITY
ANY PROPRIETOR/PARTNER/EXECUTIVE
OFFICER/MEMBER EXCLUDED?

N N/A E.L. EACH ACCIDENT \$1,000,000 E.L. DIBEASE - EA EMPLOYEE \$1,000,000 (Mandatory in NH) Il yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT | \$1,000,000 D Leased/Rented Equ. C7015399847 09/05/2022 09/05/2023 1,000,00 Limit 1,000,00 Max per Item DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be effected if more space is required) University of North Carolina at Charlotte, its officers, officials, agents and employees are additional insured for General Liability, Auto Liability and Umbrella Liability, as required by written contract. Walver of Subrogation, where permitted by law, applies in favor of University of North Carolina at Charlotte for General Liability, Auto Liability, Umbrella Liability and Workers Compensation, as required by written contract. Thirty (30) Day notice of cancellation, except for ten (10) day notice of cancellation for non payment of premium, to Certificate Holder, as required by written contract. CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE University of North Carolina THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. at Charlotte 9201 University City Boulevard AUTHORIZED REPRESENTATIVE P.O. Box 9021 Charlotte, NC 28223-0001



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	Risk Services Northeast, Inc. York NY Office				PHONE (A/C. No.	Ext): (51.6)	396-4000	FAX (AC, No.3: (800)	363-0105
One	Liberty Plaza Broadway, Suite 3201 York NY 10006 USA				E-MAIL ADDRES				
New	York NY 10006 USA					INSI	URER(S) AFFOR	IDING COVERAGE	NAIC #
NSU	HED				INSURER		h American		16535
ska	nska USA Building Inc.				INSURER		can Zurich		40142
Fou 211	r LakePointe Plaza 8 Water Ridge Pkwy #250 rlotte NC 28217 USA				INSURER	C: XL II	surance Am	erica Inc	24554
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	X XCU/Centractual Liability							PERSONAL & ADV INJURY	\$5,000,00
	GENT AGGREGATE LIMIT APPLIES PER:	H						GENERAL AGGREGATE	\$10,000,00
	POLICY X PRO X LOC							PRODUCTS - COMP/OP ACC	\$10,000,00
	OTHER:			<u></u>					
Α	AUTOMOBILE LIABILITY			BAP 6480660-00		08/31/2022	08/31/2023	COMBINED SINGLE LIMIT (Ea accident)	\$2,000,00
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	X OWNED SCHEDULED							BODILY NUURY (Per accident)	
	X HINED AUTOS X NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	
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В	WORKERS COMPENSATION AND			WC489601718		08/31/2022	08/31/2023	X PER STATUTE OTH	'
	ANY PROPRIETOR / PARTNER / EXECUTIVE N	N/A						E.L. EACH ACCIDENT	\$5,000,00
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il.	UNC Charlotte - Campus Infrastr 1 not be cancelled, reduced in a eration or cancellation by certi Included in Monopolistic states	moun fied	t, o mai	or coverages elimina 1. return receipt r	ited unti requested	l at least to the in	30 days a sured and	fter mailing written owner. Workers Comp	notice of such mensation Coverage
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MMIDD/YYYY) 09/19/2022

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CI E	IDICATED, NOTW ERTIFICATE MAY KCLUSIONS AND C	ITHSTANDING ANY RI BE ISSUED OR MAY XONDITIONS OF SUCH	PERT POLI	REME IAIN,	RANCE LISTED BELOW HAV NT, TERM OR CONDITION O THE INSURANCE AFFORDE LIMITS SHOWN MAY HAVE E	OF ANY CONTRACT D BY THE POLICE SEEN REDUCED BY	OR OTHER	DOCUMENT WITH RESPECT TO HEREIN IS SUBJECT TO	T TO WHICH THE
NSR LTR		FINSURANCE	1MSD	WVD	POLICY NUMBER	(MANAGOVÝVY	(MM DIZYYYY)	LIMITS	
	X COMMERCIAL	DEMERAL LIABILITY	1					EACH OCCURRENCE !	3,000,
	CLAIMS-M	NOE X OCCUR	1					PREMISES (En ogovrence)	ş 1,000,
Λ			١			1		MED EXP (Any one person)	ş 15,
			¥	¥	GLO 647668409	10/01/2022	10/01/2023	PERSONAL & ADV INJURY	3,000,
	GENIL AGGREGATE	LIMIT APPLIES PER:			i	1		GENERAL AGGREGATE	6,000,
	POLICY X	PRO: X LOG	1			1			6,000,
	OTHER:	ACCT LITTERS	1			1	1	THOUSONS GUILLY OF MOCI	
-	AUTOMOBILE LIABIL	ITY	+	-			-	COMBINED SINGLE LIMIT (Ex accident)	
	X ANY AUTO		1			- 1		BOOILY INJURY (Per person)	
A	OWNED	SCHEDULED	¥		BAP 6476683-09	10/01/2025	10/01/2023	BODILY INJURY (Per accident)	*
	AUTOS ONLY HIRED	NON-OWNED			1312 0470003 07	1970172022	10,01,2023		
	AUTOS ONLY	AUTOS ONLY						In an infrancial)	5
	ļ								5
В	X UMBRELLA LIA	B X OCCUR					-	FACH OCCURPENCE :	10,000,
	EXCESS LIAB	CLAMS-MADE			47-UMO-301826-08	10/01/2022	10/01/2023	AGGHEGATE	\$ 10,000,
		TENTIONS 25,000					1		\$
	WORKERS COMPENS AND EMPLOYERS' LI						-	X PER STATUTE ER	
A	ANYPROPRIETOR/PA	RYNER/EXECUTIVE No.					1	E.L. EACH ACCIDENT	3,000,
	(Maindatory In NIE)		N/A	1	NC 6476685-09	10/01/2022	10/01/2023	E.L. DISEASE - EA EMPLOYEE	3,000,
	If yes, describe under DESCRIPTION OF OF	ERATIONS below					1	E.L. DISEASE - POLICY LIMIT	3,000,
c	Excess Linbili		-	1	AEC 0184602-07	10/01/2022	10/01/2023	Contract of the Contract of th	10.000.000
				ŀ		1,,	1	,,	, , ,
bire	CRIPTION OF OREGAT	ONS/LOCATIONS/VEHIC	1 FS 4	ACOR) 101, Additional Remarks Schedute	may be atteched if on-	ra spana la renulu	ord)	***************************************
					Packaga II - Regiona				F Evieting
	ldings, Gradi								
			ugh	the	University of North	Carolina, Char	clotte is i	ncluded as an Additi	onal Insured
					tomobile Limbility wh				
					of The State of North				rolina,
					ility and Workers Com				
CE	RTIFICATE HOL	DER				CANCELLATION			

	CERTIFICATE HOLDER	CANCELLATION
	The State of North Carolina through the University of North Carolina	SHOULD ANY OF THE ABOYE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
		AUTHORIZED REPRESENTATIVE
	at Charlotte	
-	9201 University City Blvd.	Kenn Glosgen
	Charlotte, NC 28223	Marso Langer



Questions?





Charlotte Col



MIKE CAUSEY

INSURANCE COMMISSIONER & STATE FIRE MARSHAL

BRIAN TAYLOR, CHIEF STATE FIRE MARSHAL

CERTIFICATE OF COVERAGE THE STATE OF NORTH CAROLINA

Certificate Holder: Public Officers & Employee Liability Insurance Commission

of North Carolina and the General Statutes of North Carolina, Chapter

143, Articles 31 to 31D, Sections §143-291 to § 143-300.

Period: February 01, 2022 until February 01, 2023

Coverage: Tort Claims against Departments, Agencies, and Employees

Excess Liability for State Employees

Ambridge Partners, LLC - Policy # PK1035822; Kinsale Insurance Company - Policy #0100154762-1

Limits \$1,000,000 for Tort claims against the State

\$2,000,000 per employee/\$10,000,000 aggregate for claims

against state employees

The State of North Carolina and its employees, officers, agents, as covered by the Defense of State Employees as per NCGS § 143 300.2. Description:

Administrator: Department Insurance - Risk Management Division

Public Officers & Employees Liability Insurance Commission 1202 Mail Service Center, Raleigh, NC 27699-1202

This Certificate is for informational purposes only and does not alter any Note:

provision of the Tort Claims or Defense of State Employees General

Statutes of the State.

Verified By:

Buyun Hukla

Bryan Heckle, CIC, CPCU, CRM Deputy Commissioner of Risk Management

POELIC Certificate

OFFICE OF STATE FIRE MARSHAL • RISK MANAGEMENT

1202 MAIL SERVICE CENTER | RALEIGH, NC 27699-1202 | Tel 919.647.0000 | Fax 919.715.0067