



ORDER OF SAINT BENEDICT, INC

COLLEGEVILLE, MINNESOTA 56321-7211

OFFICE (320) 363-3306 FAX (320) 363-3999

Request for Certificate of Insurance

Applicant Instructions: Complete this form and fax to your insurance agent to request a **Certificate of Insurance** as required by the Order of Saint Benedict/Saint John's University.

Company Information:

Company Name		Contact Name		
Company Address		City	State	ZIP
Telephone	Fax	E-mail		

Insurance Agent Instructions: The Company listed above has applied to become a contractor for the Order of Saint Benedict and/or Saint John's University (OSB/SJU). OSB/SJU requires all contractors working on site to maintain specified insurance coverage and to submit a **Certificate of Insurance** prior to commencement of work. **Unless otherwise specified, the certificate should be for blanket coverage and not contingent upon contract.**

Requested Certificate of Insurance Information:

1. The Order of Saint Benedict and Saint John's University must be included as additional insureds on the policy.
2. Policy shall be endorsed to waive all rights of subrogation against the Order of Saint Benedict/Saint John's University.
3. Minimum insurance requirements for work on the Saint John's campus are listed below:
 - A. Worker's Compensation – State Statutory
 - B. Employer's Liability- Bodily injury by accident - \$500,000 each accident; \$500,000 per disease policy limit; \$500,000 per employee.
 - C. Commercial General Liability – (including without limitation Premises Operations; Independent Contractors (let or sublet work); Contractual Liability; Products and Completed Operations, Personal Injury and Advertising Liability; Incidental Medical Malpractice; Amendment of Pollution Exclusion – hostile fire; Cross-liability and severability of interest); Minimum Coverage \$1,000,000 Combined Single Limit per occurrence and a \$2,000,000 general and products/completed operations aggregate limits.
 - D. Commercial Auto Coverage - \$1,000,000 Combined Single Limit per occurrence. (This policy shall cover all contractor furnished, owned, hired, and non-owned vehicles, including the loading and unloading thereof.)
 - E. Umbrella Excess Liability - (following form on Employer's Liability, Comprehensive General Liability and Commercial Automobile Coverages). Minimum Coverage - \$5,000,000 Minimum Limit of liability coverage.
4. The limits of liability shall not be reduced by the costs of defense.
5. The Contractor shall maintain the required insurance in force continuously from before commencing work for a period at least twelve months after final completion, or for such longer period as may otherwise be required by the Contract Documents.
6. If greater limits or coverages are required elsewhere in the Contract Documents, the Contractor shall provide those coverages and limits as well.
7. The Contractor's Contractual Liability Insurance shall cover the Contractor's obligations and any other contractual defense or indemnity obligations of the Contractor under the Agreement or Contract.
8. Should any portion of the above be cancelled before the expiration date, the issuing insurer(s) will agree via endorsement to mail 30 days written notice to SJU/OSB.

Please note in your records that the Order of Saint Benedict/Saint John's University is an additional insured and should be notified by you of renewals, cancellations, or changes in coverage.

Please Fax, Mail, or E-mail the Certificate of Insurance and Endorsement Directly To:

OSB/SJU Physical Plant (Attn: Tammy Huston)
PO Box 7299
Collegeville, MN 56321
Fax: 320-363-3999 Email: thuston@csbsju.edu