

RISK PROFILE A

Covering Service Codes: 8, 17, 20, 28, 29, 51, 55, 56, 62, 63, 76, 90, 94, 96, 99, 102, 108, 109, 110, 111, 113, 114, 115, 116, 117, 505, 510, 515, 520, 605, 610, 612, 615, 620, 630, 635, 642, 678, 700, 702, 707, 720, 742, 744, 760, 765, 772, 773, 775, 780, 785, 805, 850, 851, 854, 860, 862, 868, 875, 880, 896, 904, 905, 915, 920, 935, 940, 950, 952, and 954. Codes provided for guidance only; profiles assigned at the discretion of SCLARC.

Coverage	Requirement	Details/Values
Abuse & Molestation	Abuse and Molestation Limit	\$1,000,000
	Abuse and Molestation Aggregate Limit	\$2,000,000
	Abuse & Molestation Liability Occurrence Basis	
	Attached Copy of Additional Insured Endorsement (with policy number)	
	Attached Copy of Primary & Non-Contributory Endorsement (with policy number)	
	Attached Copy of Waiver of Subrogation Endorsement (with policy number)	
	Self-insured retention or deductible equal to or less than \$5000	
Auto Liability	Combined Single Limit	\$1,000,000
	All Owned Autos	
	Hired Autos	
	Non-Owned Autos	
	Attached Copy of Additional Insured Endorsement (with policy number)	
	Attached Copy of Primary & Non-Contributory Endorsement (with policy number)	
	Attached Copy of Waiver of Subrogation Endorsement (with policy number)	
General Liability	Each Occurrence Limit GL	\$1,000,000
	General Aggregate Limit	\$2,000,000
	General Liability - Occurrence Basis	
	Attached Copy of Additional Insured Endorsement (with policy number)	
	Attached Copy of Primary & Non-Contributory Endorsement (with policy number)	
	Attached Copy of Waiver of Subrogation Endorsement (with policy number)	
	Self-insured retention or deductible equal to or less than \$2500	
Professional Liability	Each Occurrence Limit PL	\$1,000,000
	Aggregate Limit PL	\$2,000,000
	Professional Liability Occurrence Basis	
	Attached Copy of Additional Insured Endorsement (with policy number)	
Self-insured retention or deductible equal to or less than \$5000		
Other COI Requirements	Cert Holder Name and Address	South Central Los Angeles Regional Center ATTN: Cherylle Mallinson, Director of Community Services, cherylllem@sclarc.org Kyla Lee, Chief Operations Officer/Chief Fiscal Officer, kylal@sclarc.org 2500 S. Western Avenue LOS ANGELES CA 90018
	Additional Insured Entities	South Central Los Angeles Regional Center
Employee Theft	Limit (Coverage is optional, but highly recommended)	\$5,000
Workers' Compensation & Employers Liability	Workers Compensation applies per statute	
	EL Each Accident Limit	\$1,000,000
	EL Each Employee Limit	\$1,000,000
	EL Disease – Policy Limit	\$1,000,000
	Attached Copy of Waiver of Subrogation Endorsement (with policy number)	

RISK PROFILE B

Covering Service Codes: 17, 93, 100, 103, and 107. Codes provided for guidance only; profiles assigned at the discretion of SCLARC.

Coverage	Requirement	Details/Values
Abuse & Molestation	Abuse and Molestation Limit	\$1,000,000
	Abuse and Molestation Aggregate Limit	\$2,000,000
	Abuse & Molestation Liability Occurrence Basis	
	Attached Copy of Additional Insured Endorsement (with policy number)	
	Attached Copy of Primary & Non-Contributory Endorsement (with policy number)	
	Attached Copy of Waiver of Subrogation Endorsement (with policy number)	
	Self-insured retention or deductible equal to or less than \$5000	
Auto Liability	Combined Single Limit	\$1,000,000
	Hired Autos	
	Non-Owned Autos	
	Attached Copy of Additional Insured Endorsement (with policy number)	
	Attached Copy of Primary & Non-Contributory Endorsement (with policy number)	
	Attached Copy of Waiver of Subrogation Endorsement (with policy number)	
	Self-insured retention or deductible equal to or less than \$2500	
General Liability	Each Occurrence Limit GL	\$1,000,000
	General Aggregate Limit	\$2,000,000
	General Liability - Occurrence Basis	
	Attached Copy of Additional Insured Endorsement (with policy number)	
	Attached Copy of Primary & Non-Contributory Endorsement (with policy number)	
	Attached Copy of Waiver of Subrogation Endorsement (with policy number)	
	Self-insured retention or deductible equal to or less than \$2500	
Professional Liability	Each Occurrence Limit PL	\$1,000,000
	Aggregate Limit PL	\$2,000,000
	Professional Liability Occurrence Basis	
	Attached Copy of Additional Insured Endorsement (with policy number)	
Other COI Requirements	Cert Holder Name and Address	South Central Los Angeles Regional Center ATTN: Cherylle Mallinson, Director of Community Services, cheryllem@sclarc.org Kyla Lee, Chief Operations Officer/Chief Fiscal Officer, kylal@sclarc.org 2500 S. Western Avenue LOS ANGELES CA 90018
	Additional Insured Entities	South Central Los Angeles Regional Center
	Limit (Coverage is optional, but highly recommended)	\$5,000
Workers' Compensation & Employers Liability	Workers Compensation applies per statute	
	EL Each Accident Limit	\$1,000,000
	EL Each Employee Limit	\$1,000,000
	EL Disease – Policy Limit	\$1,000,000
	Attached Copy of Waiver of Subrogation Endorsement (with policy number)	

RISK PROFILE C

Covering Service Codes: 315, 317, and 490. Codes provided for guidance only; profiles assigned at the discretion of SCLARC.

Coverage	Requirement	Details/Values
General Liability	Each Occurrence Limit GL	\$1,000,000
	General Aggregate Limit	\$2,000,000
	General Liability - Occurrence Basis	
	Attached Copy of Additional Insured Endorsement (with policy number)	
	Attached Copy of Primary & Non-Contributory Endorsement (with policy number)	
	Attached Copy of Waiver of Subrogation Endorsement (with policy number)	
	Self-insured retention or deductible equal to or less than \$2500	
Professional Liability	Each Occurrence Limit PL	\$1,000,000
	Aggregate Limit PL	\$2,000,000
	Professional Liability Occurrence Basis	
	Attached Copy of Additional Insured Endorsement (with policy number)	
	Self-insured retention or deductible equal to or less than \$5000	
Other COI Requirements	Cert Holder Name and Address	South Central Los Angeles Regional Center ATTN: Cherylle Mallinson, Director of Community Services, cheryllem@sclarc.org Kyla Lee, Chief Operations Officer/Chief Fiscal Officer, kylal@sclarc.org 2500 S. Western Avenue LOS ANGELES CA 90018
	Additional Insured Entities	South Central Los Angeles Regional Center
Employee Theft	Limit (Coverage is optional, but highly recommended)	\$5,000
Workers' Compensation & Employers Liability	Workers Compensation applies per statute	
	EL Each Accident Limit	\$1,000,000
	EL Each Employee Limit	\$1,000,000
	EL Disease – Policy Limit	\$1,000,000
	Attached Copy of Waiver of Subrogation Endorsement (with policy number)	

RISK PROFILE D

Covering Service Codes: 17, 56, 100, 101, 102, 103, 105, 116, 612, 707, 715, 744, 772, 773, 775, and 785. Codes provided for guidance only; profiles assigned at the discretion of SCLARC.

Coverage	Requirement	Details/Values
Abuse & Molestation	Abuse and Molestation Limit	\$1,000,000
	Abuse and Molestation Aggregate Limit	\$2,000,000
	Abuse & Molestation Liability Occurrence Basis	
	Attached Copy of Additional Insured Endorsement (with policy number)	
	Attached Copy of Primary & Non-Contributory Endorsement (with policy number)	
	Attached Copy of Waiver of Subrogation Endorsement (with policy number)	
	Self-insured retention or deductible equal to or less than \$5000	
Auto Liability	Personal Auto Liability (with no exception for business use)	
General Liability	Each Occurrence Limit GL	\$1,000,000
	General Aggregate Limit	\$2,000,000
	General Liability - Occurrence Basis	
	Attached Copy of Additional Insured Endorsement (with policy number)	
	Attached Copy of Primary & Non-Contributory Endorsement (with policy number)	
	Attached Copy of Waiver of Subrogation Endorsement (with policy number)	
	Self-insured retention or deductible equal to or less than \$2500	
Professional Liability	Each Occurrence Limit PL	\$1,000,000
	Aggregate Limit PL	\$2,000,000
	Professional Liability Occurrence Basis	
	Attached Copy of Additional Insured Endorsement (with policy number)	
	Self-insured retention or deductible equal to or less than \$5000	
Other COI Requirements	Cert Holder Name and Address	South Central Los Angeles Regional Center ATTN: Cherylle Mallinson, Director of Community Services, cheryllem@sclarc.org Kyla Lee, Chief Operations Officer/Chief Fiscal Officer, kylal@sclarc.org 2500 S. Western Avenue LOS ANGELES CA 90018
	Additional Insured Entities	South Central Los Angeles Regional Center
	Additional Insured Entities	Community Impact Development
Employee Theft	Limit (Coverage is optional, but highly recommended)	\$5,000

In order to transact business with South Central Los Angeles Regional Center (SCLARC), vendors must satisfy the above listed contractual insurance requirements and provide verification of coverage. Each vendor shall, at its own expense, carry adequate insurance to fully protect both the vendor and SCLARC from all liability, losses, claims, demands, damages, judgments, and costs (including, but not limited to, reasonable attorneys' fees) of any nature for damage to property or for personal injury (including, but not limited to, death). This is important to protect vendors' interests as well as the interests of SCLARC and the individuals SCLARC serves.

Verification of coverage is now done by Gallagher Verify. Please direct, or have your insurance agent/company/broker direct, all Certificates of Insurance to GSC.COIR.SCLARC@ajg.com for processing. Please note that SCLARC will no longer accept COIs and misdirected documents may result in delayed or cancelled payment.

I am aware of SCLARC's insurance policy and understand that proof of insurance is a requirement for purchase of services (POS) utilization. I acknowledge that I must maintain current coverage to do business with SCLARC. Further, I understand that verification is contracted through Gallagher Verify and all insurance correspondence should be directed there.

Printed Name of Vendor and Title

Signature of Vendor

Date

Vendor Number

Service Code

Risk Profile