



## Certificate of Insurance Instructions

1. See sample COI and note highlighted sections that are required.
2. Please note if the Umbrella carrier is different, you will need to confirm the umbrella policy goes over other policies or update per attached sample certificate.
3. When filing out insurance please note, if you follow the wording at the bottom of sample (description of operations), “WDS Construction and Owner” you will only need to supply one certificate if you are on more than one job for WDS Construction for the policy period of your certificate of insurance. IF you specify a job location and/or owner, you will need to supply a certificate for each job location you work on for WDS Construction for that policy period.
4. Please try to use the exact wording in the description of operations.
5. **ALL ENDORSEMENT FORMS** must be supplied or your Certificate will be rejected.
6. Remember this WILL delay your payments if the correct Certificate of Insurance is NOT supplied to WDS Construction.

**Email to: [insurance@wdsconstruction.net](mailto:insurance@wdsconstruction.net)**



POLICY NUMBER:

Policy #

**COMMERCIAL  
GENERAL LIABILITY  
CG 20 10 10 01**

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR  
CONTRACTORS – SCHEDULED PERSON OR  
ORGANIZATION**

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE PART**

**SCHEDULE**

**Name of Person or Organization:**

-Any person or organization required by written contract or agreement

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

A. Section II – Who Is An Insured is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of your ongoing operations performed for that insured.

B. With respect to the insurance afforded to these additional insureds, the following exclusion is added:

**2. Exclusions**

This insurance does not apply to "bodily injury" or "property damage" occurring after:

(1) All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the site of the covered operations has been completed; or

(2) That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

**CG 20 10 10 01**

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POLICY NUMBER:

Policy #

**COMMERCIAL  
GENERAL LIABILITY  
CG 20 37 10 01**

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL INSURED – OWNERS, LESSEES OR  
CONTRACTORS – COMPLETED OPERATIONS**

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE PART**

**SCHEDULE**

**Name of Person or Organization:**

Any Person or organization with whom you have agreed, through written contract, agreement or permit, executed prior to the loss, to provide additional insured coverage for completed operations

**Location And Description of Completed Operations:**

Any location where you have agreed through written contract, agreement or permit, executed prior to the loss, to provide additional insured coverage for completed operations

**Additional Premium:**

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

**Section II – Who Is An Insured** is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of "your work" at the location designated and described in the schedule of this endorsement performed for that insured and included in the "products-completed operations hazard".

**CG 20 37 10 01**

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POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY

Policy #

CG 20 10 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR  
CONTRACTORS – SCHEDULED PERSON OR  
ORGANIZATION**

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE PART**

**SCHEDULE**

<b>Name Of Additional Insured Person(s) Or Organization(s):</b>	<b>Location(s) Of Covered Operations</b>
Any Person or organization with whom you have agreed, through written contract, agreement or permit, executed prior to the loss, to provide additional insured coverage for completed operations	Any location agreed through written contract, agreement or permit, to provide additional insured coverage for completed operations
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

B. With respect to the insurance afforded to these additional insured's, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

POLICY NUMBER:

Policy #

**COMMERCIAL  
GENERAL LIABILITY  
CG 20 37 07 04**

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL INSURED – OWNERS, LESSEES OR  
CONTRACTORS – COMPLETED OPERATIONS**

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE PART**

**SCHEDULE**

<b>Name Of Additional Insured Person(s) Or Organization(s):</b>	<b>Location And Description Of Completed Operations</b>
Any Person or organization with whom you have agreed, through written contract, agreement or permit, executed prior to the loss, to provide additional insured coverage for completed operations	Any location where you have agreed through written contract, agreement or permit, executed prior to the loss, to provide additional insured coverage for completed operations
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

**Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

**CG 20 37 07 04**

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