

# Hines

1999 Broadway  
Suite 1450  
Denver, Colorado 80202  
Phone 303.292.1999  
Fax 303.297.3915  
[www.hines.com](http://www.hines.com)  
[www.1999Broadway.com](http://www.1999Broadway.com)

## *Memo*

To: Vendors for 1999 Broadway  
From: Kaitlyn Russell, Hines  
Date: Wednesday, January 10, 2018  
Subject: Insurance Requirements for 1999 Broadway

Detailed below are the current insurance requirements for companies to perform work at 1999 Broadway. Please have a certificate of liability insurance issued and forward to the Hines Property Management Office with the following coverages and insureds:

### Certificate Holder:

FSP 1999 Broadway, LLC  
c/o Hines  
1999 Broadway, Suite 1450  
Denver, Colorado 80202

### Additional Insureds:

FSP 1999 Broadway, LLC and Hines GS Properties Inc. shall each be named as an additional insured.

### Coverages

Commercial General Liability:

- \$3,000,000 general aggregate amount
- \$1,000,000 products and completed operations aggregate amount
- \$1,000,000 personal and advertising injury amount, \$1,000,000 per occurrence amount
- \$1,000,000 fire legal liability or rented structure fire damage amount
- “Occur” box marked/checked/selected
- “Addl Insr” box marked/checked/selected
- “Subr Wvd” box marked/checked/selected

Commercial Automobile Liability:

- \$1,000,000 combined single limit or \$1,000,000 for bodily injury and \$1,000,000 property damage.
- Include coverage on all owned, hired and nonowned automobiles or any auto.
- “Addl Insr” box marked/checked/selected
- “Subr Wvd” box marked/checked/selected

Workers’ Compensation and Employers’ Liability – Statutory limits including:

- \$1,000,000 per accident
- \$1,000,000 disease policy limit
- \$1,000,000 disease each employee.

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- “Addl Insr” box marked N/A
- “Subr Wvd” box marked/checked/selected
- “Any Proprietor/Partner/Executive Officer/Member Excluded” box marked N; if marked Y, a list of all persons excluded must be included.

## Certificate of Endorsement

The Certificate of Insurance must reference a Certificate of Endorsement on behalf of the Additional Insured listed above. The Endorsement must be attached / included.

## Waiver of Subrogation

The Certificate of Insurance must reference a Waiver of Subrogation on behalf of the Additional Insured listed above. The Waiver of Subrogation must be attached / included.

## Cancellation Policy

Since Hine’s requires a minimum of 30 days’ written notice of policy cancellation, the language in the section must be modified to meet our requirements. We require the insured to provide a certificate that either deletes or strikes through the language “endeavor to” and “but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.”

## Producer Information

Producer information must be provided. Certificate of liability insurance must be signed by producer.

Please make sure that the Insured’s name, insurance agency name and phone number appear on the COI. Please contact our office with any questions. Thank you.

# EXAMPLE

COMMERCIAL GENERAL LIABILITY  
CG 20 26 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

Any person or organization for which the Named Insured has agreed to provide insurance prior to loss as provided by this policy but only to the limit and scope of insurance agreed to by the Named Insured

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 your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

**B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
  2. Available under the applicable Limits of Insurance shown in the Declarations;
- whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.