

IMPORTANT NOTICE TO ALL INSURANCE AGENTS/PROVIDERS

INSURANCE AND PRE-QUALIFICATION PROCESS

- We have streamlined our insurance certificate review and pre-qualification process.
- You will be required to provide blanket rather than project-specific insurance.
- Blanket insurance provides coverage to Barton Malow only when specifically required by a written contract.
- Blanket insurance will satisfy all insurance requirements for any purchase orders issued to your company during the policy period.

IF YOU ARE A NEW SUBCONTRACTOR OR VENDOR THAT IS SUBMITTING INFORMATION FOR THE FIRST TIME:

- You must also have an account in www.BuildingConnected.com. Your entity name and mailing address must be typed EXACTLY the same in your prequalification, your insurance certificate and your W9 form.
- We have attached sample documents including a certificate of insurance and acceptable additional insured endorsements. Please provide these directly to your insurance agent.
- We do not accept any additional insured forms that do not strictly conform to our contractual requirements.

IF YOU ARE AN EXISTING SUBCONTRACTOR OR VENDOR THAT HAS PREVIOUSLY BEEN PREQUALIFIED:

- You will receive a renewal notice when your insurance expires. At that time, you will be required to update your prequalification information.

Barton Malow Holdings strictly adheres to the contractual requirements regarding insurance certificates and additional insured endorsements for our subcontractors, vendors, and suppliers. Many standard forms utilized by insurance companies do not conform to our requirements, and significantly limit the scope of the insurance provided to Barton Malow Holdings in the event of a claim or lawsuit.

Please review the required insurance endorsement or contract language with your insured. The requested insurance coverage is commercially available.

Our contracts require that Barton Malow Holdings and all other entities, as required by written contract, shall be endorsed as additional insureds on the following:

“Subcontractor’s liability insurance policies (including general liability, excess liability, automobile liability and pollution liability, where applicable) for liability arising out of activities, operations or “work,” performed by or on behalf of Subcontractor, including BMH and/or Contractor’s general supervision of Subcontractor, products and completed operations hazard of Subcontractor, and automobiles owned, leased, hired or borrowed by Subcontractor. The coverage provided by the additional insured endorsement(s) shall be at least as broad as that provided in the Insurance Service Office, Inc.’s Additional Insured Endorsement Form CG 20 10 11 85. Forms that do not provide additional insurance for the “products and completed operations hazard,” will not be accepted. In no case shall any additional insured endorsement exclude coverage for BMH or Contractor’s own negligence, nor limit coverage for BMH or Contractor only to potential liability incurred solely as a result of Subcontractor’s acts or omissions.”

“Subcontractor” defined above includes vendors, suppliers, professional service providers, general service providers, and material deliverymen.

Barton Malow will accept the following additional insurance endorsements:

- CG 2010 11 85
- CG2010 10 01 coupled with the CG2037 10 01 forms.
- CG7048 10 15 (this is not an ISO form, but it is an example of an acceptable "scripted equivalent" form)

We will accept any manuscript form or "scripted equivalent" form that provides the following coverage:

Blanket additional insured form as required by written contract:

- For liability **arising out of** your **ongoing operations** AND
- For liability **arising out of "your work"** performed for that insured and included in the **"products-completed operations hazard"**

Examples of Additional Insured forms that are **unacceptable**:

- CG 20 33 (all versions)
- CG 20 10 (07 04 version or later)
- CG 20 37 (07 04 version or later)
- CG 70 49 (all versions)
- CGD 246 (all versions)
- CGL 8820 (all versions)

WE ALSO REQUIRE

- The additional insurance provided must be primary and non-contributory with any other insurance or self-insurance maintained by the additional insured, whether on a primary, umbrella or excess basis.
- Each insurer must carry AM Best's rating of A-VII or better.
- Each policy must be endorsed so that the issuing insurer will provide thirty (30) days written notice of cancellation to the BMH, Contractor and/or any additional insureds.
- Waiver of subrogation required for all coverages, unless statutorily prohibited.

A sample certificate of insurance and the acceptable Additional Insured forms are attached for your reference and convenience. We thank you for your time and cooperation. We look forward to working with your company on a future project.

Thank you.

The Risk Management and Legal departments of Barton Malow Holdings

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – (FORM B)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

SCHEDULE

Name of Person or Organization:

Barton Malow Holdings and its entities or subsidiaries, and any person or organization required by written contract.

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

WHO IS AN INSURED (Section II) 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" for that insured by or for you.

POLICY NUMBER: same as on certificate

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:

Barton Malow Holdings and its entities or subsidiaries, and any person or organization required by written contract

(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.

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

<p>Name of Person or Organization: Barton Malow Holdings and its entities or subsidiaries, and any person or organization required by written contract</p>
<p>Location And Description of Completed Operations: All locations, as required by written contract.</p>
<p>Additional Premium:</p>

(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".