

CITY OF LYNWOOD
PUBLIC WORKS PERMIT APPLICATION
ENGINEERING DIVISION

Site Plan No: _____ Date: _____

Job Address: _____

Work Proposed: _____

Contractor

Name: _____

Address: _____ ZIP Code: _____

Telephone No: _____

Fax No: _____

State License No: _____ Expiration Date: _____ Class: _____

Business License No.: _____

Liability Insurance Certificate

Producer: _____

Coverage Amount: _____

Telephone No: _____

Effective Date: _____

Fax No: _____

Expiration Date: _____

Property Owner

Name: _____

Address: _____

Telephone No: _____

FOR CITY USE ONLY

The following requirements below must be met prior to issuance of a Public Works Permit:

1. Job Standard Plans (For Street/Lane Closures Traffic Control Plans/Drawing)
2. Certificate of Liability Insurance Certificate (**City of Lynwood named as additional insured**)
3. Permit Fees
4. Performance Deposit / Bond
5. Business License
6. State License
7. Property Owner Information
8. Preconstruction Meeting (TBD by City)

REMARKS: _____

Field Check By: _____ Date: _____

Permit Issued By: _____ Date: _____

Permit No. _____



ENGINEERING DIVISION REQUIREMENTS FOR ISSUANCE OF PUBLIC RIGHT-OF-WAY PERMIT

The following conditions must be complied with before issuance of an Engineering permit:

A. State License

Contractor must possess a valid (A) General Engineering Contractor or (C) Specialty Contractor Contractor's License from the State of California that pertains to the specific scope of work

NO EXCEPTIONS. See attached list.

B. Business License

Contractor must possess a current Business License from the City. For information please visit <https://lynwood.hdlgov.com/home>

C. Faithful Performance Deposit or Bond

1. Deposit in the form of cash, cashier check or certified check must be filed with the Engineering Division.
2. No personal checks will be accepted.
3. Amount of deposit or bond is to be determined by the Engineering Division.
4. The deposit is refundable approximately thirty (30) to sixty (60) days after satisfactory completion of work performed and final inspection.

D. Liability Insurance

1. A current copy of the Certificate of Liability Insurance must be filed with the Engineering Division.
2. Applicant must sign an identification agreement with the City.
3. Certificate of Liability Insurance must show that the City is named as an additional insured. Certificate must also contain a clause substantially. Companies Affording Coverage under Certificate of Liability Insurance must be admitted in the State of California. Coverage Limits must be no less than \$2,000,000.00. See attached sample.

- (A) General Engineering Contractor
- (B) General Building Contractor
- (C) Specialty Contractor**
- C-2 - Insulation and Acoustical Contractor
- C-4 - Boiler, Hot Water Heating and Steam Fitting Contractor
- C-5 - Framing and Rough Carpentry Contractor
- C-6 - Cabinet, Millwork and Finish Carpentry Contractor
- C-7 - Low Voltage Systems Contractor
- C-8 - Concrete Contractor**
- C-9 - Drywall Contractor
- C10 - Electrical Contractor**
- C11 - Elevator Contractor
- C12 - Earthwork and Paving Contractors
- C13 - Fencing Contractor
- C14 - Metal Roofing Contractor [repealed]
- C15 - Flooring and Floor Covering Contractors
- C16 - Fire Protection Contractor
- C17 - Glazing Contractor
- C20 - Warm-Air Heating, Ventilating and Air-Conditioning Contractor
- C21 - Building Moving/Demolition Contractor
- C23 - Ornamental Metal Contractor
- C26 - Lathing Contractor [repealed]
- C27 - Landscaping Contractor**
- C28 - Lock and Security Equipment Contractor
- C29 - Masonry Contractor
- C31 - Construction Zone Traffic Control Contractor**
- C32 - Parking and Highway Improvement Contractor**
- C33 - Painting and Decorating Contractor
- C34 - Pipeline Contractor**
- C35 - Lathing and Plastering Contractor
- C36 - Plumbing Contractor**
- C38 - Refrigeration Contractor
- C39 - Roofing Contractor
- C42 - Sanitation System Contractor**
- C43 - Sheet Metal Contractor
- C45 - Electrical Sign Contractor
- C46 - Solar Contractor
- C47 - General Manufactured Housing Contractor
- C50 - Reinforcing Steel Contractor
- C51 - Structural Steel Contractor
- C53 - Swimming Pool Contractor
- C54 - Ceramic and Mosaic Tile Contractor
- C55 - Water Conditioning Contractor
- C57 - Water Well Drilling Contractor
- C60 - Welding Contractor
- C61 - Limited Specialty
- ASB - Asbestos Certification
- HAZ - Hazardous Substance Removal Certification
- HIC - Home Improvement Certification [repealed]

ACORD

CERTIFICATE OF LIABILITY INSURANCE

OP ID DR
CITTELI

DATE (MM/DD/YYYY)

PRODUCER

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A:

INSURER B:

INSURER C:

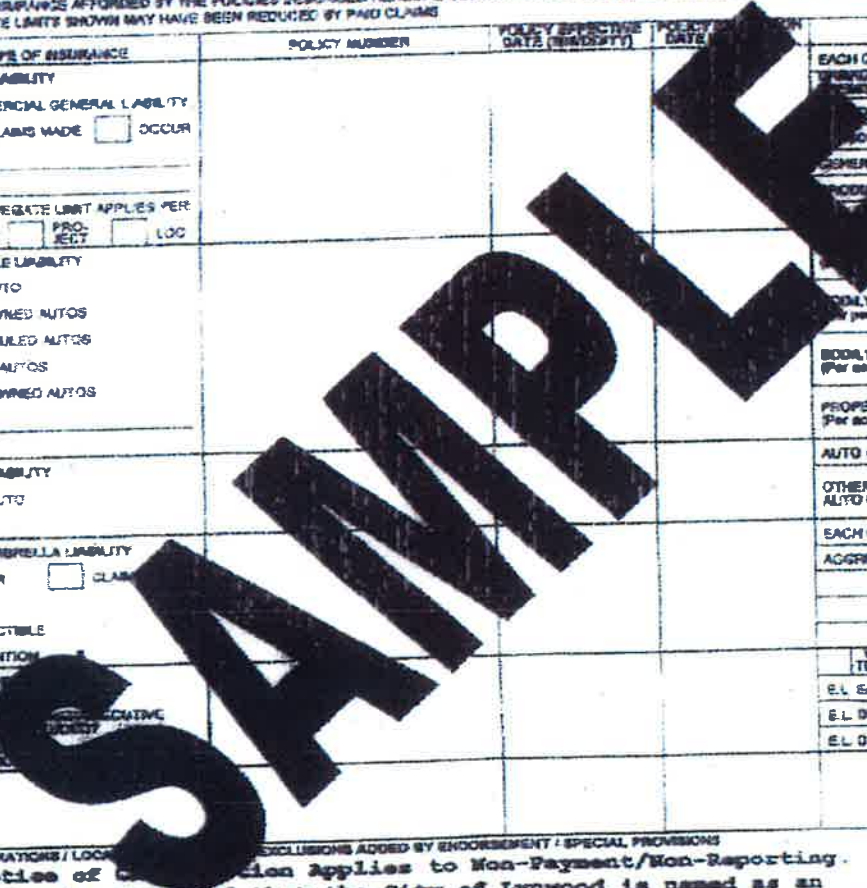
INSURER D:

INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENTS, TERMS OR CONDITIONS OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSURANCE TYPE (NAIC)	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
GENERAL LIABILITY	GENERAL LIABILITY				EACH OCCURRENCE \$
	COMMERCIAL GENERAL LIABILITY				PERMITS TO REPORT \$
	CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/>				PER OCCURRENCE (EA OCCURRENCE) \$
					PER POLICY (per one person) \$
					PERSONAL & ADV INJURY \$
GENERAL AGGREGATE LIMIT APPLIES PER					GENERAL AGGREGATE \$
	POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/>				PER OCCURRENCE PER POL AGG \$
AUTOMOBILE LIABILITY	AUTOMOBILE LIABILITY				PER OCCURRENCE \$
	ANY AUTO				PER OCCURRENCE \$
	ALL OWNED AUTOS				PER OCCURRENCE \$
	SCHEDULED AUTOS				PER OCCURRENCE \$
GARAGE LIABILITY	ANY AUTO				PER OCCURRENCE \$
					PER OCCURRENCE \$
EXCESS/UMBRELLA LIABILITY	EXCESS/UMBRELLA LIABILITY				PER OCCURRENCE \$
	OCCUR <input type="checkbox"/> CLAIM <input type="checkbox"/>				AGGREGATE \$
	DEDUCTIBLE				\$
WORKERS COMP/EMPLOYERS LIAB	WORKERS COMP/EMPLOYERS LIAB				WC STATU-TORY LIMITS \$
	ANY PROFESSIONAL OFFICERS/EMPLOYERS LIABILITY				OTHER \$
OTHER	OTHER				E.L. EACH ACCIDENT \$
					E.L. DISEASE - EA EMPLOYEE \$
					E.L. DISEASE - POLICY LIMIT \$



DESCRIPTION OF OPERATIONS / LOCAL EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

10 Days Notice of Cancellation Applies to Non-Payment/Non-Reporting.
It is agreed and understood that the City of Lynwood is named as an additional insured with respects to work performed by the named insured () within the City of Lynwood, per attached Policy Endorsement.

CERTIFICATE HOLDER

CANCELLATION

City of Lynwood
Public Works Department
Attn: Insurance/Contracts
11330 Bullis Road
Lynwood, CA 90262

LYNWOOD

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL BE RESPONSIBLE FOR _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT. THIS NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER ITS AGENTS OR REPRESENTATIVE.
AUTHORIZED REPRESENTATIVE

NAMED INSURED:
POLICY NUMBER:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.
CG 20 10 11 85

**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:

*City of Lynwood
Project Owner*

Project: All Ongoing Contractual Work/Operations

(If no entry appears above, the name of the person or organization to be insured by this endorsement will be shown in the Declarations as applicable.)

WHO IS AN INSURED (Section 1 of the policy is amended to include as an insured the person or organization shown in the Schedule above, with respect to liability arising out of 'your work' for that insured by this endorsement.)

This endorsement provides no subrogation in favor of, City of Lynwood & the Project Owner, their officers, employees or agents. This policy will not be terminated or permitted to lapse without written notice to certificate holder.

Coverage as is afforded by this policy for the benefit of the additional insured(s) is primary and any other coverage maintained by such additional insured(s) shall be non-contributing with the coverage provided under this policy.

POLICY NUMBER:

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 B

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):	Address	Description of Completed
City of Lynwood		

Information required to complete this schedule, if not shown above, will be shown in the Declarations.

Section 8 - Who Is An Insured: This endorsement provides that the Additional Insured the person(s) or organization(s) shown in this schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by the "work" of the business operations described in the schedule of this endorsement performed for that insured, and including "products" and "completed operations hazard".

PRIMARY CONTRIBUTION:

Further agreement is provided by this policy for the benefit of the Additional Insured that the Named Insured shall be primary with respect to any claim, loss or liability arising out of the operations of the Named Insured, or any insurance maintained by said Additional Insured shall be non-contributing.