CITY OF LOS ANGELES APPLICANT'S DECLARATION OF SELF-INSURANCE

It Is hereby RESOLVED that (Name and Address of Organization): For-profit Corporation, Non-profit Corporation, General Partnership, Limited Partnership, Sole Proprietor, which is a , has a formal program to self-insure its exposure in the amount of \$_____ per occurrence, and \$_____ annual aggregate limit, and agrees to the following terms and condition: To provide the City of Los Angeles (CITY) the same defense of suits and payment of claims as would be afforded by first dollar Insurance with respect to its operations; for which CITY has issued a permit, lease, contract, or other agreement (hereinafter Agreement). During the term of the Agreement with CITY, to provide annually an audited financial statement that gives evidence of capacity to respond to 2. claims within the self-insured retention listed above. Failure to provide such financial information may be grounds for disapproval of this self-insurance program and may cause suspension or termination of Agreement with CITY. (Most recent statement is attached.) To notify the cognizant City Agency/Bureau immediately of any claim, judgement, settlement, award, verdict or change in financial standing 3. which would substantially affect the protection that this self-insurance program provides and to provide CITY at least 30 days prior written notice of intent to discontinue this self-insurance program. Name and Address of Applicant's Legal Counsel: Name and Address of Applicant's Claims Representative: **DECLARATION** The Undersigned hereby declares: that this resolution has been adopted In accordance with applicable law and any other governing documents, that this program is now in force and that the persons whose signatures appear hereon are authorized to act as stated in the Resolution. The Undersigned herewith transmits this form, along with any other evidence of insurance which may be required, to the City Attorney, Insurance and Bonds, 200 N. Main Street, Los Angeles, CA 90012-4168, for approval prior to the start of the operation or tenancy. _____ and ____ (Signature) _____ and ____ (Print Name and Title) (Print Name and Title) Telephone: Note: Two officers must sign for a corporation. City Agency/Bureau Applicability: This self-insurance program applies to the following specific permit, lease or agreement with the City: City of Los Angeles Board of Public Works

200 North Spring Street, Room 355 Los Angeles, California 90012