



**Please attach copies of insurance certificates from a company authorized to do business in the State of Minnesota in the following amounts:**

<b>1. GENERAL LIABILITY:</b>	<b>Public liability, including premises, products and complete operations</b>
1) Bodily Injury Liability	\$1,000,000 each person \$3,000,000 each occurrence
2) Property Damage Liability or	\$3,000,000 each occurrence
3) Bodily Injury and Property Damage Combined	\$3,000,000 single limit
<b>2. COMPREHENSIVE:</b>	<b>Automobile Liability Insurance including owned, non-owned and hired vehicles</b>
1) Bodily Injury Liability	\$1,000,000 each person \$3,000,000 each occurrence
2) Property Damage Liability or	\$3,000,000 each occurrence
3) In lieu of 1) and 2) Bodily Injury and Property Damage Combined	\$3,000,000 single limit
<p><b>3. Such Certificate shall verify that the registrant is insured against claims for personal injury, including death, as well as claims for property damage arising out of (i) use of the occupancy of the right-of-way by the registrant, its officers, agents, employees and permittees, and (ii) placement and use of equipment or facilities in the right-of-way by the registrant, its officers, agents, employees and permittees, including but not limited to, protection against liability arising from completed operations, damage of underground equipment and collapse of property. Such certificate shall also name the City as an additional insured as to whom the coverage's required herein are in force and applicable and for whom defense will be provided as to all such coverage's. Such certificate shall require that the Engineer be notified 30 days prior to cancellation of the policy.</b></p>	

**SIGNATURE**

By \_\_\_\_\_  
 Its \_\_\_\_\_  
 Date \_\_\_\_\_

**ACKNOWLEDGMENT OF INDEMNIFICATION**

The applicant hereby acknowledges the indemnification provided by Subd. 2 of Subsection 421.18 of the City Code. NOTE: This acknowledgement need not be provided by a company holding a franchise with the City.

By \_\_\_\_\_  
 Its \_\_\_\_\_  
 Date \_\_\_\_\_