

**Town of Goshen, Connecticut**  
**42 North Street , Goshen, CT 06756-0187**  
**Phone: (860) 491-2308**

**INSURANCE REQUIREMENTS OF CONTRACTORS**

The Board of Selectman may require contractors to carry the following minimum insurance coverages and a **Certificate of Insurance naming the Town of Goshen as an additional insured**, must accompany all bids:

1. Statutory Workers Compensation and Employers Liability with limits of \$100,000 each Accident, \$100,000 Disease-each employee and \$500,000 Disease-policy limit.
2. Commercial General Liability (Form 1988 ISO Occurrence Form or equivalent)

Limits: \$1,000,000 - Each Occurrence for Bodily Injury and Property Damage  
\$1,000,000 - Products, Completed Operations Aggregate Limit  
\$1,000,000 - General Liability Aggregate\* Limit  
\$1,000,000 - Personal Injury

\*General Aggregate MUST include per project endorsement.

Town of Goshen, its officials, employees and volunteers, MUST be additional insured with reference to this project on a primary basis. The policy endorsement evidencing this coverage must be provided with the certificate of liability insurance.

The insurer shall waive all rights of subrogation against the Town of Goshen, its officers, employees and volunteers arising from work performed by contractor pursuant to any permit issued by the Town of Goshen.

Umbrella limits over General Liability limits may be used to make up the required limits. The additional insured coverage MUST be provided by the Umbrella to mirror the General Liability coverage.

3. Automobile Liability covering all owned, non-owned, and hired vehicles.

Limit: \$1,000,000 - Combined Single Limit for Bodily Injury and Property Damage.

Umbrella limits over Automobile Liability limits may be used to make up the required limits.

If Umbrella Liability is used to make up required limits, the policy shall not reduce or restrict coverage provided by the underlying Commercial General Liability or Automobile Liability insurance policies.

Any cancellation or reduction or material changes in insurance coverage will require thirty (30) days notice to the Town of Goshen by certified mail with return receipt requested.

Insurance carriers providing the required insurance coverages must have an A.M. Best's financial rating of "A-VII" or better.