



SPERGLO-01

CMAES

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/5/24

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement.

PRODUCER License # 17520374 Truecoverage, LLC 2400 Louisiana Blvd, NE Bldg #3 Albuquerque, NM 87114 CONTACT NAME: PHONE (A/C, No, Ext): (505) 657-4672 FAX (A/C, No): (505)214-4004 INSURER(S) AFFORDING COVERAGE INSURER A: Great Northern Insurance Company NAIC # 20303 INSURER B: Federal Insurance Company 20281 INSURER C: Travelers Property Casualty Company of America 25674 INSURER D: Underwriters At Lloyds 32727

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liability, Workers Compensation and Employers' Liability, Crime, Cyber/Privacy/Network, and Cyber Excess.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

APPROVED By Sheila Barker at 8:58 am, Aug 26, 2024

CERTIFICATE HOLDER CANCELLATION

Certificate holder information: Snohomish County Department of Information Technology, 3000 Rockefeller Avenue, M/S 709, Everett, WA 98201. Cancellation notice: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE: Charlotte Maestas

**Liability Insurance****Endorsement**

<b>Policy Period</b>	OCTOBER 27, 2023 TO OCTOBER 27, 2024
<b>Effective Date</b>	OCTOBER 27, 2023
<b>Policy Number</b>	3605-78-44 WUC
<b>Insured</b>	SPERIDIAN GLOBAL HOLDINGS, LLC
<b>Name of Company</b>	GREAT NORTHERN INSURANCE COMPANY
<b>Date Issued</b>	OCTOBER 19, 2023

This Endorsement applies to the following forms:

**GENERAL LIABILITY**

Under Who Is An Insured, the following provision is added.

**Who Is An Insured****Additional Insured -  
Scheduled Person  
Or Organization**

Persons or organizations shown in the Schedule are insureds; but they are insureds only if you are obligated pursuant to a contract or agreement to provide them with such insurance as is afforded by this policy.

However, the person or organization is an insured only:

- if and then only to the extent the person or organization is described in the Schedule;
- to the extent such contract or agreement requires the person or organization to be afforded status as an insured;
- for activities that did not occur, in whole or in part, before the execution of the contract or agreement; and
- with respect to damages, loss, cost or expense for injury or damage to which this insurance applies.

No person or organization is an insured under this provision:

- that is more specifically identified under any other provision of the Who Is An Insured section (regardless of any limitation applicable thereto).
- with respect to any assumption of liability (of another person or organization) by them in a contract or agreement. This limitation does not apply to the liability for damages, loss, cost or expense for injury or damage, to which this insurance applies, that the person or organization would have in the absence of such contract or agreement.

**CHUBB<sup>®</sup>**

**Liability Endorsement**  
*(continued)*

Under Conditions, the following provision is added to the condition titled Other Insurance.

**Conditions**

**Other Insurance –  
Primary, Noncontributory  
Insurance – Scheduled  
Person Or Organization**

If you are obligated, pursuant to a contract or agreement, to provide the person or organization shown in the Schedule with primary insurance such as is afforded by this policy, then in such case this insurance is primary and we will not seek contribution from insurance available to such person or organization.

**Schedule**

Persons or organizations that you are obligated, pursuant to a contract or agreement, to provide with such insurance as is afforded by this policy.

All other terms and conditions remain unchanged.

Authorized Representative



# CHUBB® Chubb Commercial Excess And Umbrella Insurance

## Conditions

### **Maintenance Of Underlying Insurance And Underlying Limits** (continued)

Failure to comply with this condition will not invalidate this insurance. But in the case of any such failure, our obligation or liability will not exceed that which would have applied absent any failure to comply with this condition.

You must notify us as soon as practicable if any underlying insurance is no longer valid or in full force or effect.

### **Other Insurance**

If other valid and collectable insurance is available to the insured for loss we would otherwise cover under this insurance, our obligations are limited as follows.

This insurance is excess over any other insurance, whether primary, excess, contingent or on any other basis.

We will have no duty to defend the insured against any suit if any provider of any other insurance has a duty to defend such insured against such suit.

We will pay only our share of the amount of loss, if any, that exceeds the sum of the total:

- amount that all other insurance would pay for loss in the absence of this insurance; and
- of all deductible and self-insured amounts under all other insurance.

This insurance is not subject to the terms or conditions of any other insurance.

### **Separation Of Insureds**

Except with respect to the Limits Of Insurance, and any rights or duties specifically assigned in this insurance to the first named insured, this insurance applies:

- as if each named insured were the only named insured; and
- separately to each insured against whom claim is made or suit is brought.

### **Titles Of Paragraphs**

The titles of the various paragraphs of this policy and endorsements, if any, attached to this policy are inserted solely for convenience or reference and are not to be deemed in any way to limit or affect the provisions to which they relate.

### **Transfer Of Rights And Duties**

Your rights and duties under this insurance may not be transferred without our written consent. However, if you die, then your rights and duties will be transferred to your legal representative, but only while acting within the scope of duties as your legal representative, or to anyone having temporary custody of your property until your legal representative has been appointed.

### **Transfer Or Waiver Of Rights Of Recovery Against Others**

We will waive the right of recovery we would otherwise have had against another person or organization for loss to which this insurance applies, provided the insured has waived their rights of recovery against such person or organization in a contract or agreement that is executed before loss.

To the extent that the insured's rights to recover all or part of any payment made under this insurance have not been waived, those rights are transferred to us. The insured must do nothing after loss to impair them. At our request, the insured will bring suit or transfer those rights to us and help us enforce them.

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**Conditions****Transfer Or Waiver Of  
Rights Of Recovery  
Against Others  
(continued)**

Any amount recovered will be apportioned as follows:

- first, we shall receive all amounts recovered until we have been fully reimbursed for all amounts we have incurred, including costs or expenses of such recovery proceedings.
- Then, you are entitled to claim for any further amount recovered.

**When We Do Not Renew**

If we decide not to renew this policy, we will mail or deliver to the first named insured stated in the Declarations written notice of the nonrenewal not less than sixty (60) days before the expiration date. If notice of nonrenewal is mailed, proof of mailing will be sufficient proof of notice.

# CHUBB® Chubb Commercial Excess And Umbrella Insurance

## Schedule Of Underlying Insurance

**Effective Date:** OCTOBER 27, 2023  
**Policy Number:** 7989-99-91  
**Insured:** SPERIDIAN GLOBAL HOLDINGS, LLC

**Description** **Limits**

### Employers Liability

**Insurer:** TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA  
**Policy No.:** UB-4X181227 **Coverage B - Employer's Liability**  
**Policy Period:** 10/27/2023 **Bodily Injury By Accident**  
**to:** 10/27/2024 \$1,000,000 **Each Accident**  
**Bodily Injury By Disease**  
\$1,000,000 **Policy Limit**  
\$1,000,000 **Each Employee**

### Commercial General Liability

**Insurer:** GREAT NORTHERN INSURANCE COMPANY  
**Policy No.:** 36057844 \$1,000,000 **Each Occurrence**  
**Policy Period:** 10/27/2023 \$2,000,000 **General Aggregate**  
**to:** 10/27/2024 \*SEE BELOW **Products/Completed Operations Aggregate**  
**Occurrence** \$1,000,000 **Personal and Advertising Injury (aggregate when applicable)**

\*PRODUCTS/COMPLETED OPERATIONS AGGREGATE IS INCLUDED IN THE GENERAL AGGREGATE LIMIT

### Automobile Liability

**Insurer:** FEDERAL INSURANCE COMPANY  
**Policy No.:** 73606527 \$1,000,000 **Each Accident**  
**Policy Period:** 10/27/2023  
**to:** 10/27/2024

**CHUBB** Chubb Commercial Excess And Umbrella Insurance

**Schedule Of Underlying Insurance**

**Effective Date:** OCTOBER 27, 2023

**Policy Number:** 7989-99-91

**Insured:** SPERIDIAN GLOBAL HOLDINGS, LLC

**Description** **Limits**

**Employee Benefits Liability**

**Insurer:** GREAT NORTHERN INSURANCE COMPANY

**Policy No.:** 36057844 \$1,000,000 *Each Claim*

**Policy Period:** 10/27/2023

**to:** 10/27/2024 \$1,000,000 *Aggregate*

**Claims Made**

**Retrospective Date** 10/27/2015

**Non-Owned & Hired Auto Liability**

**Insurer:** FEDERAL INSURANCE COMPANY

**Policy No.:** 73606527 \$1,000,000 *Each Accident*

**Policy Period:** 10/27/2023

**to:** 10/27/2024

**Occurrence**

**Authorization**

All other terms and conditions remain unchanged.

Authorized Representative  
August 14, 2023







**WORKERS COMPENSATION  
AND  
EMPLOYERS LIABILITY POLICY**

**ENDORSEMENT WC 00 03 13 (00) - 001**

**POLICY NUMBER: UB-4x181227**

**WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT**

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit any one not named in the Schedule.

**SCHEDULE**

**DESIGNATED PERSON:**

**DESIGNATED ORGANIZATION:**

**ANY PERSON OR ORGANIZATION FOR WHICH THE INSURED HAS AGREED  
BY WRITTEN CONTRACT EXECUTED PRIOR TO LOSS TO FURNISH THIS  
WAIVER.**

Any person or organization for which the employer has agreed by written contract, executed prior to loss, may execute a waiver of subrogation. However, for purposes of work performed by the employer in Missouri, this waiver of subrogation does not apply to any construction group of classifications as designated by the waiver of right to recover from others (subrogation) rule in our manual.

**DATE OF ISSUE: 10-23-2023 ST ASSIGN:**

**PAGE 1 OF 1**

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## Liability Insurance

### Endorsement

**Policy Period** OCTOBER 27, 2023 TO OCTOBER 27, 2024

**Effective Date** OCTOBER 27, 2023

**Policy Number** 3605-78-44 WUC

**Insured** SPERIDIAN GLOBAL HOLDINGS, LLC

**Name of Company** GREAT NORTHERN INSURANCE COMPANY

**Date Issued** JULY 31, 2023

This Endorsement applies to the following forms:

#### GENERAL LIABILITY

Under **Who Is An Insured**, the following provision is added.

#### Who Is An Insured

##### **Additional Insured - Scheduled Person Or Organization**

Persons or organizations shown in the Schedule are **insureds**; but they are **insureds** only if you are obligated pursuant to a contract or agreement to provide them with such insurance as is afforded by this policy.

However, the person or organization is an **insured** only:

- if and then only to the extent the person or organization is described in the Schedule;
- to the extent such contract or agreement requires the person or organization to be afforded status as an **insured**;
- for activities that did not occur, in whole or in part, before the execution of the contract or agreement; and
- with respect to damages, loss, cost or expense for injury or damage to which this insurance applies.

No person or organization is an **insured** under this provision:

- that is more specifically identified under any other provision of the **Who Is An Insured** section (regardless of any limitation applicable thereto).
- with respect to any assumption of liability (of another person or organization) by them in a contract or agreement. This limitation does not apply to the liability for damages, loss, cost or expense for injury or damage, to which this insurance applies, that the person or organization would have in the absence of such contract or agreement.

# CHUBB

## **Liability Endorsement** *(continued)*

Under Conditions, the following provision is added to the condition titled Other Insurance.

### **Conditions**

#### **Other Insurance – Primary, Noncontributory Insurance – Scheduled Person Or Organization**

If you are obligated, pursuant to a contract or agreement, to provide the person or organization shown in the Schedule with primary insurance such as is afforded by this policy, then in such case this insurance is primary and we will not seek contribution from insurance available to such person or organization.

### **Schedule**

Persons or organizations that you are obligated, pursuant to a contract or agreement, to provide with such insurance as is afforded by this policy.

All other terms and conditions remain unchanged.

Authorized Representative

