ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/2/2026

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. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Arthur J. Gallagher Risk Management Services, LLC
950 Pacific Avenue
Suite 830
Tacoma WA 98402

CONTACT NAME: Bobby Walpole
PHONE (A/C, No, Ext): 425-586-1006
FAX (A/C, No): 253-572-1430
E-MAIL ADDRESS: Bobby_Walpole@ajg.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Amerind Risk Management Corp	
INSURER B : StarNet Insurance Company	40045
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED TULARES-01
The Tulalip Tribes of Washington
6406 Marine Dr
Tulalip, WA 98271

COVERAGES **CERTIFICATE NUMBER:** 1472013234 **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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY			TG00000296-06	7/1/2026	7/1/2027	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	POLICY X PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ 2,000,000
	OTHER:							$
B	AUTOMOBILE LIABILITY			PCA 9500526 - 15	7/1/2026	7/1/2027	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY; SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY; NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
A	UMBRELLA LIAB X OCCUR			TG00000296-06	7/1/2026	7/1/2027	EACH OCCURRENCE	$ 15,000,000
	X EXCESS LIAB CLAIMS-MADE						AGGREGATE	$ 15,000,000
	DED RETENTION $							$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N			WC00000287-07	7/1/2026	7/1/2027	PER STATUTE OTH-ER	$20,000,000
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? **(Mandatory in NH)**	N / A					E.L. EACH ACCIDENT	$ 2,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 2,000,000
							E.L. DISEASE - POLICY LIMIT	$ 2,000,000
A	Healthcare Professional Liability (Limits shown include Excess)			TG00000296-06	7/1/2026	7/1/2027	Limit Aggregate	$16,000,000 $18,000,000

APPROVED
By Stephanie Rousseau at 8:25 am, Jul 06, 2026

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The County, its officers, officials, employees and agents are to be covered as additional insureds as respects liability arising out of activities performed by or on behalf of the Tribes in connection with this Agreement. Such coverage shall be primary and noncontributory insurance as respects the County, its officers, officials, employees and agents.

Foye Creek project

CERTIFICATE HOLDER

Snohomish County, a political subdivision of the State of Washington
3000 Rockefeller Avenue, M/S 404
Everett. WA 98201

CANCELLATION

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
Arthur J. Gallagher Risk Management Services, LLC

777 108th Ave NE | Suite 200
Bellevue, WA 98004
USA
425.454.3386
www.ajg.com

Named Insured List

Tulalip Tribes of Washington
6406 Marine Dr.
Tulalip, WA 98271

Named Insureds:

Quil Ceda Village
Consolidated Borough of Quil Ceda Village;
Tulalip of Washington dba: Tulalip Business Park
Tulalip Housing Limited Partnership #3
Tulalip Tribes Housing Department
Tulalip Foundation
Tulalip Health Systems
Qualco Energy (Qualco)
Tulalip Energy Corporation

Tulalip Tribal Federal Corporation dated 1935
Tulalip Tribal Federal Corporation, a Section 17 dated 2017
Tulalip Tribal Federal Corporation, a Section 17 dated 1936
Tulalip Market,
Marine Drive Gas Station
Tulalip Liquor Store,
North Sound Pacific Seafoods
Quil Ceda Creek Counseling Company
Tulalip Pharmacy / Tulalip Clinical Pharmacy – now LLC of TTFC, no board of its own.
Salish Networks, Inc. - certified Low voltage installer, data, fiber , coax, access control and cctv. – Now LLC

Tulalip Tribes of Washington Employee Health Plan
Tulalip Tribes of Washington Employee Retirement Plan
Tulalip Tribes Minors Trust 1993
Tulalip Tribes of Washington and its wholly or majority owned subsidiaries and any interest which may now exist or hereinafter be created or acquired which are owned

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – AUTOMATIC STATUS FOR OTHER PARTIES WHEN REQUIRED IN WRITTEN CONTRACT OR AGREEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

A. **Section II – Who Is An Insured** is amended to include as an additional insured:

1. Any person or organization when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy; and

Such person(s) or organization(s) is an additional insured only with respect to liability for "bodily injury", "property damage" or “personal and advertising injury” caused, in whole or in part, by the performance of the written contract or agreement.

However, the insurance afforded to such additional insured described above:

a. Only applies to the extent permitted by law; and

b. Will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

A person’s or organization’s status as an additional insured under this endorsement ends when the written contract or agreement ends.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusion applies:

This insurance does not apply to:

1. "Bodily injury", "property damage" or “personal and advertising injury” arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:

a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or

b. Supervisory, inspection, architectural or engineering activities.

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage", or the offense which caused the ”personal and advertising injury”, involved the rendering of, or the failure to render, any professional architectural, engineering or surveying services.

2. “Bodily injury”, “property damage”, or “personal and advertising injury” due to the rendering of or failure to render any professional service.

C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

The most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement described in Paragraph **A.1.**; or

2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

All other terms and conditions of the policy apply.