	AC	CERTIFIC	CATE OF LIABIL	ITY INSU	<b>JRANCE</b>	CSR SF	DATE (MM/DD/YYYY)		
	ODUCE	R		THIS CER	TIFICATE IS ISSU	HINDE-1 ED AS A MATTER OF IN	12/01/06 IFORMATION		
L	cen	y Insurance Service se# 0566246		ONLYANI	ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR				
8	51 S	outh Oak Park Road		ALTER TH	IE COVERAGE AF	FORDED BY THE POLICE	EXTEND OR CIES BELOW		
		a CA 91724					JILO DELOW.		
	none URED	e: 626-966-3664 Fax:	626-966-3895	INSURERS	AFFORDING COVI	ERAGE	NAIC#		
INC	UKED			INSURER A:	Safeco Ins	. Co. of Americ	a 24732		
		Hinderliter de Ll HDL Software, LLC	amas & Asso &	INSURER B:	Safeco Ins	. Co. of Americ	a 24732		
		HDL Coren & Cone	D== #200	INSURER C:					
		HDL Software, LLC HDL Coren & Cone 1340 Valley Vista Diamond Bar CA 91	765 #200	INSURER D:					
CC	VER	AGES		INSURER E:					
			AVE BEEN ISSUED TO THE INCLIDED MAKE	'D 4001 / E00 -					
		CONCINCIAL LEGISLOR CONDITION OF AP	AVE BEEN ISSUED TO THE INSURED NAME NY CONTRACT OR OTHER DOCUMENT WIT	これ ひこくひこくて エン・バルバン	THE OFFICIOATE A	**** ****			
		RTAIN, THE INSURANCE AFFORDED BY T S. AGGREGATE LIMITS SHOWN MAY HAV	ME POLICIES DESCRIBED HEREINTS SUBT	ECT TO ALL THE TER	MS, EXCLUSIONS AND	CONDITIONS OF SUCH			
NSF	ADD'I		POLICY NUMBER	POLICY EFFECTIVE	POLICY EXPIRATION DATE (MM/DD/YY)				
		GENERAL LIABILITY	7 OLIOT NOMBER	DATE (MM/DD/YY)	DATE (MM/DD/YY)				
A		COMMERCIAL GENERAL LIABILITY	02BP402231-2	01/01/07	01/01/08	EACH OCCURRENCE DAMAGE TO RENTED	\$ 2,000,000		
		CLAIMS MADE X OCCUR		02,02,0,	01/01/08	PREMISES (Ea occurence)  MED EXP (Any one person)	\$2,000,000		
					4	PERSONAL & ADV INJURY			
						GENERAL AGGREGATE	\$2,000,000		
		GEN'L AGGREGATE LIMIT APPLIES PER				PRODUCTS - COMP/OP AGG	\$4,000,000		
		X POLICY PRO- JECT LOC				30,111,00	44,000,000		
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT			
В		X ANY AUTO	24CC109957-2	01/01/07	01/01/08	(Ea accident)	\$1,000,000		
		ALL OWNED AUTOS				BODILY INJURY			
		SCHEDULED AUTOS				(Per person)	\$		
		X HIRED AUTOS X NON-OWNED AUTOS				BODILY INJURY	\$		
		X NON-OWNED AUTOS				(Per accident)	J J		
						PROPERTY DAMAGE	\$		
		GARAGE LIABILITY				(Per accident)			
	ŀ	ANY AUTO				AUTO ONLY - EA ACCIDENT	\$		
	I					OTHER THAN EA ACC	\$		
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$		
		OCCUR CLAIMS MADE				AGGREGATE	\$		
					ľ	. Took come	\$		
	L	DEDUCTIBLE		The state of the s			\$		
		RETENTION \$					\$		
		ERS COMPENSATION AND OYERS' LIABILITY	-			WC STATU- OTH- TORY LIMITS ER			
	ANY P	ROPRIETOR/PARTNER/EXECUTIVE				E.L. EACH ACCIDENT	\$		
	If yes,	ER/MEMBER EXCLUDED? describe under				E.L. DISEASE - EA EMPLOYEE	\$		
$\dashv$	OTHE	AL PROVISIONS below				E.L. DISEASE - POLICY LIMIT	\$		
,			0000400004						
A.	Dus	iness Property	02BP402231-2	01/01/07	01/01/08	Spec Form	\$433,000		
ESC	RIPTIO	N OF OPERATIONS / LOCATIONS / VEHIC	LES / EXCLUSIONS ADDED BY ENDORSEN	IENT / SPECIAL PROV	ISIONS	Deduc/Occ	\$1,000		
.0	day	s notice of cancella	tion for non-payment	of premium	a. Certifica	ıte			
10]	.der	is named as additio	nal insured per attac	ched endors	sement.				
ERTIFICATE HOLDER CANCELLATION									
SANMA-0 SHOUL DATE T					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEADED MAIL 30 DAYS WRITTEN				
				NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT PAILURE TO DESCRIBE					
								Jim Saco	
400 County Center				AUTHORIZED REPRESENTATIVE					
	Redwood City CA 94063				Borak ()	WID DOW	al		
O	KD 25	(2001/08)				© ACORD C	ORPORATION 1988		

ACORD 25 (2001/08)

POLICY NUMBER: 02BP402231-2 COMMERCIAL GENERAL LIABILITY Hinderliter De Llamas, HDL Software & HDL Coren & Cone

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS (FORM B)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

## **SCHEDULE**

Name of Person or Organization:

County of San Mateo 400 County Center Redwood City, CA 94063

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of your ongoing operations performed for that insured.

CG 20 10 10 93

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	ACORD CER	TIFIC	ATE OF LIABILI	TY INSU	JRANCE	CSR SF HINDE-1	DATE (MM/DD/YYYY) 11/30/06								
PRODUCER Valley Insurance Service License# 0566246 861 South Oak Park Road Covina CA 91724 Phone: 626-966-3664 Fax: 626-966-3895				THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.											
				INSURERS A	AFFORDING COV	ERAGE	NAIC#								
INS	URED				Preferred 1	Employers									
	Hinderliter of	de Lla	mas &	INSURER B:											
	Associates & 1340 Valley Diamond Bar (	Vista CA 917	Dr #200	INSURER D:											
~~				INSURER E:											
	VERAGES HE POLICIES OF INSURANCE LISTED	BELOW HAV	/E BEEN ISSUED TO THE INSURED NAMED	ABOVE FOR THE PO	OLICY PERIOD INDICA	TED NOTWITHSTANDING									
A M P	NY REQUIREMENT, TERM OR CONDIT IAY PERTAIN, THE INSURANCE AFFOR OLICIES. AGGREGATE LIMITS SHOWN	TON OF ANY RDED BY TH	CONTRACT OR OTHER DOCUMENT WITH E POLICIES DESCRIBED HEREIN IS SUBJECT	RESPECT TO WHIC	H THIS CERTIFICATE	MAY BE ISSUED OR									
	INSRD TYPE OF INSURANC	E	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMIT	rs .								
	GENERAL LIABILITY					EACH OCCURRENCE DAMAGE TO RENTED	\$								
	COMMERCIAL GENERAL	OCCUR				PREMISES (Ea occurence)	\$								
						MED EXP (Any one person) PERSONAL & ADV INJURY	\$								
						GENERAL AGGREGATE	\$								
	GEN'L AGGREGATE LIMIT APP	PLIES PER:				PRODUCTS - COMP/OP AGG	\$								
	POLICY PRO- JECT AUTOMOBILE LIABILITY	LOC		±											
	ANY AUTO					COMBINED SINGLE LIMIT (Ea accident)	\$								
	ALL OWNED AUTOS					BODILY INJURY	\$								
	SCHEDULED AUTOS					(Per person)	Φ								
	HIRED AUTOS NON-OWNED AUTOS	A Anna ann				BODILY INJURY (Per accident)	\$								
						PROPERTY DAMAGE (Per accident)	\$								
	GARAGE LIABILITY					AUTO ONLY - EA ACCIDENT	\$								
	ANY AUTO					OTHER THAN AUTO ONLY: EA ACC	\$								
	EXCESS/UMBRELLA LIABILITY	1				EACH OCCURRENCE	\$								
	OCCUR CLAIM	MS MADE				AGGREGATE	\$								
	DEDUCTIBLE						\$								
	RETENTION \$						\$								
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					X WC STATU- OTH- TORY LIMITS ER									
A	ANY PROPRIETOR/PARTNER/EXECU	TIVE	WKN125849-2	01/01/07	01/01/08	E.L. EACH ACCIDENT	\$ 1000000								
	OFFICER/MEMBER EXCLUDED?  If yes, describe under SPECIAL PROVISIONS below					E.L. DISEASE - EA EMPLOYEE									
	OTHER					E.L. DISEASE - POLICY LIMIT	\$ 1000000								
ESC	PRINTION OF OPERATIONS / LOCATIO	Ne / VEUICI	ES / EXCLUSIONS ADDED BY ENDORSEME	NT (SPECIAL PRO)	//SIONS										
			ation for nonpayment			orting.									
				-	_	-									
ER	TIFICATE HOLDER			CANCELLATIO	ON										
SANMA-0  County of San Mateo Budget Director Jim Saco				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL INDEAVED TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT THE INSURER TO THE AGENTS OF THE PRESENTATIVES.  AUTHORIZED REPRESENTATIVE 1 1											
									Redwood City		63	Harold J. Borak MUND BOOK			

ACORD 25 (2001/08)

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	ACORD CERTIFIC	CATE OF LIABIL	ITY INSU	JRANCE	CSR SF HINDE-1	DATE (MM/DD/YYYY) 11/30/06		
Va Li 86	DDUCER 11ley Insurance Service cense# 0566246 11 South Oak Park Road		ONLY AND HOLDER.	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.				
	vina CA 91724 none:626-966-3664 Fax:	626-966-3895	INSURERS A	INSURERS AFFORDING COVERAGE				
INS	URED		INSURER A:	ACE America	an ins. Co,			
			INSURER B:					
	Hinderliter de Ll 1340 Valley Vista Diamond Bar CA 91	amas & Asso & Dr #200	INSURER C:					
	Diamond Bar CA 91	765 "200	INSURER D:					
cc	VERAGES		INSURER E.					
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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.								
	ADD'L INSRD TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMIT	S		
	GENERAL LIABILITY				EACH OCCURRENCE DAMAGE TO RENTED	\$		
	COMMERCIAL GENERAL LIABILITY				PREMISES (Ea occurence)	\$		
	CLAIMS MADE OCCUR	2			MED EXP (Any one person)	\$		
		-			PERSONAL & ADV INJURY GENERAL AGGREGATE	\$		
	GEN'L AGGREGATE LIMIT APPLIES PER	-			PRODUCTS - COMP/OP AGG	\$		
	POLICY PRO- JECT LOC							
	AUTOMOBILE LIABILITY ANY AUTO				COMBINED SINGLE LIMIT (Ea accident)	\$		
	ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	\$		
	HIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$		
			***		PROPERTY DAMAGE (Per accident)	\$		
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$		
	ANY AUTO				OTHER THAN AUTO ONLY:  AGG	\$		
	EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$		
	OCCUR CLAIMS MADE				AGGREGATE	\$		
	DEDUCTIBLE					\$		
	RETENTION \$					\$		
<del> </del>	WORKERS COMPENSATION AND		***************************************		WC STATU- OTH- TORY LIMITS ER	\$		
	EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE				E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOYEE	\$		
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - POLICY LIMIT	\$		
A	OTHER Professional Liabi	CRL129811	02/15/06	02/15/07	Each Occ Gen Agg.	1,000,000		
1	CRIPTION OF OPERATIONS / LOCATIONS / VEHI O days notice of cancel							
CERTIFICATE HOLDER CANCELLATION								
	County of San Mate Budget Director	SANMA-0	DATE THEREOF, NOTICE TO THE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL INDEADON MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, THE FALLEST OF SALL WAS ABLITT OF ANY KIND UPON THE INSURER, ITS ASSESSMENT				
	Jim Saco 400 County Center			AUTHORIZED REPRESENTATIVE				
	Redwood City CA 94	Harold J.	Harold J. Borak March Porak					
ACC	ACORD 25 (2001/08) © ACORD CORPORATION 1988							