

ACORD™ CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 9/14/2007
PRODUCER KRAFT INSURANCE BROKERAGE 4340 Redwood Hwy #F142 San Rafael, CA 94903 (415) 507-9074		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.
INSURED Hydroscience Engineers, Inc. 10569 Old Placerville Road Sacramento, CA 95827		
		INSURERS AFFORDING COVERAGE
		NAIC#
		INSURER A: <u>Travelers/St. Paul United States Fidelity</u>
		INSURER B: <u>Peerless Insurance Company</u>
		INSURER C: <u>Zurich American Insurance Company</u>
		INSURER D: <u>State Fund</u>
		INSURER E:

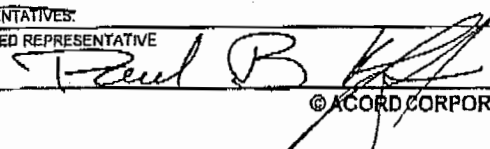
COVERAGES

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.

INSR LTR	ADDM. INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	X	GENERAL LIABILITY	BK01759447	12/18/06	12/18/07	EACH OCCURRENCE \$ 1 million
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMSMADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1 million GENERAL AGGREGATE \$ 2 million PRODUCTS - COM/POF AGG \$ 2 million
B	X	AUTOMOBILE LIABILITY	BA9685718	2/9/07	2/9/08	COMBINED SINGLE LIMIT (Ea accident) \$ 1 million
		<input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS				BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EAACC \$ AGG \$
A		EXCESS/UMBRELLA LIABILITY	BK01759447	12/18/06	12/18/07	EACH OCCURRENCE \$ 2 million
		<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMSMADE DEDUCTIBLE RETENTION \$				AGGREGATE \$ \$ \$
D		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	1778422	3/1/07	3/1/08	<input checked="" type="checkbox"/> WC/STATA-TORY LIMITS <input type="checkbox"/> OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				E.L. EACH ACCIDENT \$ 1 million E.L. DISEASE - EA EMPLOYEE \$ 1 million E.L. DISEASE - POLICY LIMIT \$ 1 million
		OTHER				
C		Professional Liability	EOC 3641601	12/18/06	12/18/07	\$2 million per claim \$2 million aggregate

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Project: Pescardero Community Sewer Project
 The County of San Mateo, its officers, agents and employees are included as additional insureds for general and auto liability for the coverages afforded herein under the Travelers additional insured endorsement for the services of Hydroscience Engineers, Inc. Coverage is primary with waiver of subrogation.

CERTIFICATE HOLDER County of San Mateo	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL NOTICE 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 
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COUNTY OF SAN MATEO
MEMORANDUM

DATE: September 20, 2007
TO: Faiza Steele, Risk Management FAX (650)363-4864
FROM: Oristela Guidos FAX (650) 361-8220 PONY DPW155
SUBJECT: Contract Insurance Approval

CONTRACTOR NAME: Hydrosience Engineers, Inc.

DO THEY TRAVEL: No

PERCENT OF THE TIME: N/A

NUMBER OF EMPLOYEES:

DUTIES (SPECIFIC): Pescadero Community Sewer Project Study

COVERAGE:	Amount	Approve	Waive	Modify
Comprehensive General Liability	\$1mil	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Motor Vehicle Liability	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Professional Liability	_____	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worker's Compensation	Statutory	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REMARKS / COMMENTS

Signature *Faiza Steele* 9/20/07

