

Exhibit 1 Insurance Requirements

The following packet includes samples of the insurance information that is required in order to be awarded a contract with Vericon Construction Company, LLC. Please review the checklist below to ensure you are submitting all required items.

We strongly suggest that you forward this to your insurance agent to ensure accuracy. Please note: simply sending a Certificate of Liability Insurance is no longer acceptable. Please refer to the checklist for additional required items.

ACORD 25 - COI with Specified Wording (See attached sample for exact wording- it is the only phrasing that will be accepted.)
Schedule of Forms/ Summary of Coverage Index
CG2037 - Add'l Insured Completed Operations or equivalent
CG2010 - Add'l Insured On-Going Operations or equivalent
CG2404 - Waiver of Subrogation
CG2001 – Primary Non-Contributory Wording
ACORD 855 - NY Construction Cert of Liability Insurance Addendum if applicable (ie, your project(s) are in NY)
Workers Comp Declaration Page with States covered under policy (NY must be listed if project is in that State)

A. ACORD 25: Service Contractor shall provide the following minimum insurance coverage:

- a. Comprehensive General Liability:** \$1,000,000/ \$2,000,000 aggregate
Including blanket contractual, products and completed operation for three years after completion of the work (explosion, collapse and underground coverage if applicable); and Contractor’s Protective Liability if the Subcontractor subcontracts to another all or any portion of the work; the following limit; Combined Bodily Injury and Property Damage.
Endorsements required: CG 2037; CG 2010; CG 2001; CG 2404 (or equivalent)
- b. Comprehensive Auto Liability:** \$1,000,000
Naming all owned, non-owned and hired vehicle with the above limit.
Endorsements required: CG 2037; CG 2010; CG 2001; CG 2404 (or equivalent)
- c. Umbrella Liability:** \$5,000,000
In excess of Employer’s Liability, Comprehensive General Liability and Comprehensive Auto Liability (no more restrictive than the underlying insurance).
- d. Workers Compensation Insurance/
Employers Liability Insurance:** \$ Statutory/ \$1,000,000

B. Summary of Coverage/ Index of Endorsement Page(s)

C. NY ACORD 855:

Please note that if your company performs or plans to perform work in **New York**, an ACORD 855 is required. This is in “addition” to the standard certificate of insurance.

D. Workers Compensation Declarations Page

Listed on this page should be all states covered under the policy. Please note that if your company performs or plans to perform work in **New York**, then **New York** must be listed.

E. Certificate Holder:

Vericon Construction Company, LLC.
1063 Route 22 East
Mountainside, NJ 07092

F. Certificate Description Must State:

Vericon Construction Company, LLC. is named as Additional Insured on the above policies (except Workers Compensation) on a primary & non-contributory basis for ongoing (CG 2010 10/01) & completed operations (CG2037 10/01). Waiver of Subrogation applies on all policies in favor of Vericon Construction Company, LLC. Umbrella follows form to CGL & Auto.

Please review the above checklist that is required by our insurance company and submit all forms that are listed to the following: insurance@vericonbuilds.com

Any questions, please contact Kimberly McGowan at 908-873-0022