

# Association of California Water Agencies Joint Powers Insurance Authority

P.O. Box 619082, Roseville, CA 95661-9082

## CERTIFICATE OF COVERAGE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE COVERAGE DOCUMENT. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE COVERAGE DOCUMENTS LISTED HEREIN.

### MEMBER

Stinson Beach County Water District  
P. O. Box 245  
Stinson Beach, CA 94970-0245

### COVERAGE INFORMATION

This is to certify that coverage documents listed herein have been issued to the Member Agency herein for the Coverage period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which the certificate may be issued or may pertain, the coverage afforded by the coverage documents listed herein is subject to all the terms, conditions and exclusions of such coverage documents.

Type of Coverage	Form #	Effective Date	Expiration Date	Limits	
<b>General Liability</b> Commercial General Liability Contractual Liability Products/Completed Operations Occurrence	MOLC-100122	10/01/2022	10/01/2023	Per Occurrence	\$1,000,000
				Aggregate	\$1,000,000
<b>Auto Liability</b> Owned Autos Hired Autos Non-Owned Autos	MOLC-100122	10/01/2022	10/01/2023	Per Occurrence	\$1,000,000
<b>Property</b> Buildings, Fixed Equipment Personal Property Auto Physical Damage Mobile Equipment Crime					
<b>Workers' Compensation</b> Part 1 - Workers' Compensation Part 2 - Employer's Liability	MOWC&EL-070123	07/01/2023	07/01/2024	Part 1 Part 2 Each Accident Disease - each employee Disease - coverage limit	Statutory Limits  \$2,000,000 \$2,000,000 \$2,000,000
<b>Other</b>					

### DESCRIPTION

Regarding: Refunding Bond Agreement Dated June 1, 2013.

Additional Covered Party(ies), as required by written contract or permit: Bank of Nevada, per attached Addendum.

**Request ID:** 0000014213

### CERTIFICATE HOLDER

Bank of Nevada  
c/o Western Alliance Bankcorporation  
One East Washington Street, Suite 1400  
Phoenix, AZ 85004

### CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED COVERAGES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE TERMS OF THE MEMORANDUMS OF COVERAGE.

### AUTHORIZED REPRESENTATIVE DATE

*Walt A. Seals*

6/2/2023

**ADDENDUM**  
to the  
**Memorandum of Liability Coverage**  
  
for the  
**Association of California Water Agencies**  
**Joint Powers Insurance Authority**

**FORM NUMBER:** MOLC-100122  
**MEMBER:** Stinson Beach County Water District  
**COVERAGE PERIOD:** 10/01/2022 - 10/01/2023  
**ADDENDUM DATE:** 10/01/2022  
**REQUEST ID:** 0000014213

Change in the following Sections

Section IV. WHO IS COVERED is amended to include the following entity(ies) as an Additional Covered Party(ies):

Bank of Nevada, as required by written contract or permit. Additional Covered Party(ies) is(are) covered only if the liability is caused in whole or in part by the acts or omissions of the **Member Agency** and excludes coverage for the sole negligence of the Additional Covered Party(ies), and subject to a \$1,000,000 per occurrence and \$1,000,000 annual aggregate limit of liability.

The following is added to SECTION VII. CONDITIONS (I). WITHDRAWAL/CANCELLATION:

If the **Authority** elects to cancel this coverage before the stated expiration date, the **Authority** will provide the Additional Covered Party(ies) at least (30) days prior written notice, as required by a written contract or agreement.

Regarding: Refunding Bond Agreement Dated June 1, 2013.

Signed By: Walt A. Seal Date: 6/2/2023  
(Authorized Representative)