

Subcontractor Insurance Requirement Agreement

This **Subcontractor Insurance Requirement Agreement** ("Agreement") is entered into between the Contractor and Subcontractor as identified below. The Subcontractor agrees to comply with the following insurance requirements as a condition of performing work for the Contractor.

1. Insurance Coverage

The Subcontractor shall, at its own expense, maintain in effect the following insurance policies with insurers authorized to do business in the applicable jurisdiction:

- **Commercial General Liability Insurance** with limits of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate.
- **Workersâ€™ Compensation Insurance** as required by law.
- **Automobile Liability Insurance** with a combined single limit of not less than \$1,000,000 per accident for bodily injury and property damage, covering all owned, non-owned, and hired vehicles.
- **Professional Liability Insurance** (if applicable) with limits of not less than \$1,000,000 per claim and in the aggregate.

2. Additional Insured

The Contractor and its representatives shall be named as additional insureds on the liability policies listed above (except Workersâ€™ Compensation).

3. Certificates of Insurance

The Subcontractor shall provide valid certificates of insurance to the Contractor prior to commencing any work and upon renewal of each policy thereafter, evidencing compliance with the above requirements.

4. Notice of Cancellation

All insurance policies shall require at least thirty (30) daysâ€™ written notice to the Contractor prior to cancellation, non-renewal, or material modification.

5. Indemnification

The Subcontractor shall indemnify, defend, and hold harmless the Contractor from and against any and all claims, damages, losses, and expenses resulting from Subcontractorâ€™s failure to maintain insurance as specified in this Agreement.

6. Acceptance

By signing below, both parties agree to the above insurance requirements as a condition of the subcontract.

Contractor Representative

Date: _____

Subcontractor Representative

Date: _____