



## **RICHARD TAM ALUMNI CENTER FACILITY RENTAL GENERAL INSURANCE REQUIREMENTS**

### **The Official Policy:**

Nevada System of Higher Education (NSHE) policy is to require outside users of NSHE/UNLV facilities to provide a certificate of insurance naming the Board of Regents, Nevada System of Higher Education on behalf of UNLV, as additional insured. The certificate of insurance should provide general liability coverage of at least \$1,000,000 combined single limit per occurrence.

### **Who Needs Insurance?**

- Off-campus organizations
- Student Organizations inviting the general public to their event.
- Events which are considered at high risk at the University and/or Alumni Association's discretions.

### **What Type of Insurance?**

- General liability coverage
- \$1,000,000 (1 million dollars) combined single limit per occurrence
- Certificate must name the Board of Regents, NSHE/UNLV as Additional Insured.
- Certificate must be presented to the UNLV Alumni Office, Attn: Jason Roth at least five (5) business days prior to the date of the event.
- For further clarification and an example please see page 3.

### **Where Do I Obtain Insurance?**

- Through an insurance agent of the organization's choice.
- Listed below are a few possible insurance providers in the area:

#### **George L. Brown Insurance Agency**

4455 S. Pecos Road  
Las Vegas, NV 89121  
Phone: (702) 735-9333 Fax: (702) 735-6129  
[www.glbins.com](http://www.glbins.com)

#### **Francis L. Dean & Associates, Inc.**

6767 S. Spruce Street, Suite 280  
Centennial, CO 80112  
Phone: (800) 968-5350  
[www.fdean.com](http://www.fdean.com)

#### **American Specialty Insurance Services**

142 N. Main Street  
Roanoke, IN 46783  
Phone: (260) 672-8800 Fax: (260) 672-8835  
[www.amerspec.com](http://www.amerspec.com)

#### **Insurmart**

124 S. 6<sup>th</sup> Street, Suite 150  
Las Vegas, NV 89101  
Phone: (702) 795-1777  
[www.insurmart.com](http://www.insurmart.com)

#### **Atlantic Insurance Agency**

9775 S. Maryland Parkway #C  
Las Vegas, NV 89123  
Phone: (702) 877-6688 Fax: (702) 877-6242  
[www.atlantic-ins.com](http://www.atlantic-ins.com)

#### **Tom Molloy Insurance**

1615 S. Maryland Parkway  
Las Vegas, NV 89104  
Phone: (702) 382-4100 Fax: (702) 382-4186  
[www.tommolloyinsurance.com](http://www.tommolloyinsurance.com)

**More Insurance Information:**

NSHE/UNLV is willing to accept statements of self-insurance from other governmental agencies since many have been receptive to accepting NSHE/UNLV's statement of self-insurance when using their facilities.

In reviewing requests from other State of Nevada agencies, NSHE/UNLV will continue to use the State Government Organizational Chart as shown in the current edition of the Nevada State Administration Manual. Since the various agencies participate in the same self-insurance program as NSHE/UNLV, there is no need to require a certificate of insurance from those agencies included in the chart.

In regards to NSHE/UNLV liability insurance coverage as part of the State self-insurance program, the criteria established to assist with the determination of a NSHE/ UNLV sponsored activity, group, or event and control by NSHE/UNLV as part of its normal activities and operations have been payroll and finances. For an activity, group, or event to be a NSHE/UNLV sponsored activity, any revenue generated should be deposited into an appropriate NSHE Business Center account (checks made payable to the NSHE Board of Regents) and any expenditures incurred in support of this activity disbursed from this account in accordance with NSHE regulations and procedures. In addition, employees and volunteers should comply with established NSHE and State procedures for the employment and supervision of individuals, whether as employees or volunteers. The facility supervisor should request written confirmation from the appropriate institutional departmental director or academic dean of sponsorship of the event.

Any student government (CSUN) or university sponsored event would be covered by the self-insurance program of the State of Nevada. In the event of joint sponsorship between CSUN and a student organization, the self-insurance would only extend to CSUN. Student Organizations, recognized by CSUN, are not officially covered by the self-insurance program. Fraternities and sororities would also fall into the category of "recognized" organizations and the self-insurance program would not extend to them if any of their attendees are not UNLV faculty, staff or student.

CERTIFICATE OF INSURANCE					ISSUE DATE (MM/DD/YY)	
PRODUCER			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.			
<b>*REQUIRED INSURANCE</b>			COMPANIES AFFORDING COVERAGE			
INSURED			COMPANY A			
			COMPANY B			
			COMPANY C			
COVERAGES						
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LIST 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 HERE IN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.						
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFF DATE (MM/DD/YY)	POLICY EFF DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY				GENERAL AGGREGATE	\$2,000,000
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/CP AGS	\$1,000,000
	<input type="checkbox"/> <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				PERSONAL & ADV. INJURY	\$1,000,000
	<input type="checkbox"/> OWNERS & CONTRACTOR'S PROT.				EACH OCCURRENCE	\$1,000,000
	<input type="checkbox"/> UNDERGROUND EXPLOSION AND COLLAPSE				FIRE DAMAGE (ANY ONE FIRE)	\$
	<input type="checkbox"/> INDEPENDENT CONTRACTOR				MED. EXPENSE (ONE PERSON)	\$
B	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$500,000
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (PER PERSON)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (PER ACCIDENT)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE	\$
	<input type="checkbox"/> HIRED AUTOS				EACH OCCURRENCE	\$
	<input type="checkbox"/> NON-OWNED AUTOS				AGGREGATE	\$
	<input type="checkbox"/> GARAGE LIABILITY					\$
*	EXCESS LIABILITY				STATUTORY LIMITS	
	<input type="checkbox"/> UMBRELLA FORM				EACH ACCIDENT	\$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				DISEASE POLICY LIMIT	\$
					DISEASE - EACH EMPLOYEE	\$
					PER CLAIM	\$500,000
B	PROFESSIONAL LIABILITY (IF APPLICABLE)				MINIMAL AGGREGATE	\$1,000,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / SPECIAL ITEMS UNLV, ITS OFFICERS, EMPLOYEES AND VOLUNTEERS ARE INSURED WITH RESPECT TO LIABILITY ARISING OUT OF THE ACTIVITIES BY OR ON BEHALF OF THE NAMED INSURED IN CONNECTION WITH THE WORK PERFORMED FOR UNLV						
CERTIFICATE HOLDER / ADDITIONAL INSURED			CANCELLATION			
Board of Regents Nevada System of Higher Education 4505 Maryland Parkway Las Vegas, NV 89154			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED OR COVERAGE REDUCED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL MAIL DAY WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT. AUTHORIZED REPRESENTATIVE			



## Insurance Documentation Specifications for Facility Users

\*To be attached to Alumni Relations facility usage paperwork.\*

Any event open to individuals other than UNLV students, faculty, and staff requires insurance. In order for an event that is open to the non-UNLV community to be considered a UNLV departmental sponsored activity covered by the NSHE/UNLV State self-insurance program, certain criteria must be met:

1. The event must be part of the normal activities and operations of the department (fall within the mission statement of the department).
2. Any revenue generated (i.e. admission charged) must be deposited into an appropriate NSHE Business Center account (checks made out to NSHE Board of Regents).
3. Any expenditure incurred in support of this event must be disbursed from this account in accordance with NSHE regulations and procedures.

\_\_\_\_\_ The event being held on campus on the date listed below is a UNLV Department sponsored event meeting the criteria listed above. As such this event is covered by the State insurance program.

\_\_\_\_\_ The event being held on campus on the date listed below does not meet the criteria to be considered a UNLV departmental sponsored activity. A certificate naming the Board of Regents, NSHE/UNLV as additionally insured for general liability coverage in the amount of \$1,000,000.00 single limit per occurrence is attached. Please see the Guide to Insurance Requirements for more detailed information.

Event Title: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_

Sponsoring Department: \_\_\_\_\_

Responsible Person: \_\_\_\_\_  
(e.g., Dean/Chair/Director)

Signature: \_\_\_\_\_

*Note -- the determination of whether a department needs to provide a certificate of insurance is separate from what the department will be charged for the use of the facility for the event.*