		S-BAYA1				OP ID: LA		
A		ABILITY INSURANCE DATE (MM/DD/YYYY) 09/19/2022				````		
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HO CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), A REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.							TE HOI BY THE	LDER. THIS E POLICIES
lf :	PORTANT: If the certificate holder i SUBROGATION IS WAIVED, subject s certificate does not confer rights to	to the te	erms and conditions of th	e policy, certain po				
			1-421-2424	CONTACT House A	ccounts			
Inter 205 E Hunt	market Insurance Agcy Inc E Main Street, Suite 3-4 ington, NY 11743 market Ins Agency. Inc			NAME: FAX: FAX: <t< td=""><td>21-2004</td></t<>				21-2004
								NAIC #
				INSURER A : Philade	Iphia Inden	nnity Ins Co		29424
INSUR Bay	Area Education Support							29424
dba S	Sylvan Learning Center Grand Avenue			INSURER C :				
	and, CA 94610			INSURER D :				
				INSURER E :				
				INSURER F :				
-			E NUMBER:			REVISION NUMBER:		
INE CE	IS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RE RTIFICATE MAY BE ISSUED OR MAY CLUSIONS AND CONDITIONS OF SUCH	QUIREMI PERTAIN,	ENT, TERM OR CONDITION THE INSURANCE AFFORD	OF ANY CONTRACT	OR OTHER I S DESCR I BEI	DOCUMENT WITH RESPE	ст то	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL SUB	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	тѕ	
Α	COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE	\$	1,000,000
	CLAIMS-MADE X OCCUR	x	PHPK2462589	10/22/2022	10/22/2023	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
	χ Corp Punishment		PHPK2462589	10/22/2022 1	10/22/2023	MED EXP (Any one person)	\$	5,000
					PERSONAL & ADV INJURY	\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	3,000,000
	POLICY PRO- JECT X LOC					PRODUCTS - COMP/OP AGG	\$	3,000,000
	OTHER:						s	
Α	AUTOMOBILE LIABILITY				2 10/22/2023	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
	ANY AUTO		PHPK2462589	10/22/2022		BODILY INJURY (Per person)	s	
	OWNED SCHEDULED AUTOS	D				BODILY INJURY (Per accident)	\$	
	X HIRED AUTOS ONLY X NON-OWNED					PROPERTY DAMAGE (Per accident)	\$	
							\$	
Α	X UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$	3,000,000
	EXCESS LIAB CLAIMS-MADE		PHUB831965	10/22/2022	10/22/2023	AGGREGATE	\$	3,000,000
	DED X RETENTION \$ 10000						\$	
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				09/01/2022 09/01/2023	X PER OTH- STATUTE ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A	12BCAM8EKU	09/01/2022		E.L. EACH ACCIDENT	\$	1,000,000
						E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below				1010-1	E.L. DISEASE - POLICY LIMIT	\$	1,000,000
	Abuse&Molestation		PHPK2462589			Occ/Agg		\$1M/\$3M
A	Prof Liability		PHPK2462589	10/22/2022	10/22/2023	Occ/Agg		\$1M/\$3M
Cert	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Certificate Holder is included as an Additional Insured, if required by written contract or agreement.							
L								
CER	TIFICATE HOLDER							
		MTDIABL			ESCRIBED POLICIES BE C			
	Mt. Diablo Unified Schoo District		I DATE THI	EREOF, NOTICE WILL				
	1936 Carlotta Drive Concord. CA 94519	AUTHORIZED REPRESENTATIVE						

ACORD 25 (2016/03)	ACORD	25 ((2016/03)
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Bleny Ologecester © 1988-2015 ACORD CORPORATION. All rights reserved. THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

Mt Diablo Unified School District

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:
 - 1. In the performance of your ongoing operations; or
 - 2. In connection with your premises owned by or rented to you.

However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- 2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- **2.** Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.



A Member of the Tokio Marine Group

One Bala Plaza, Suite 100 Bala Cynwyd, Pennsylvania 19004 610.617.7900 Fax 610.617.7940 PHLY.com

COMMERCIAL UMBRELLA LIABILITY INSURANCE POLICY DECLARATIONS

Philadelphia Indemnity Insurance Company	28923 Intermarket Insurance Agency 205 East Main Street Suite 3-4 Huntington, NY 11743
	(631) 421-2424
NAMED INSURED: Bay Area Education Suppor	t Systems
MAILING ADDRESS: 1345 Grand Ave Piedmont, CA 94610-1000	
POLICY PERIOD: FROM <u>10/22/2022</u> TO TIME AT YOUR MAILING ADDRESS SHOWN ABOVE	10/22/2023 AT 12:01 A.M. STANDARD

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

LIMITS OF INSURANCE				
EACH OCCURRENCE LIMIT (LIABILITY COVERAGE)	\$3,000,000			
PERSONAL & ADVERTISING INJURY LIMIT	\$3,000,000	Any one person or organization		
PRODUCTS COMPLETED OPERATIONS AGG	REGATE LIMIT	\$3,000,000		
GENERAL AGGREGATE LIMIT (LIABILITY CON respect to Auto Liability and Products Completed		\$3,000,000		

RETAINED LIMIT					
RETAINED LIMIT:	\$	10,000			

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PREMIUM

PREMIUM SUBTOTAL STATE TAXES, FEES, SURCHARGES (if applicable)

\$ PREMIUM TOTAL (including Taxes, Fees, Surcharges) AUDIT PERIOD: VIN NOT APPLICABLE ANNUALLY SEMI-ANNUALLY QUARTERLY ANNUALLY

DESCRIPTION OF BUSINESS

FORM OF BUSINESS: CORPORATION

BUSINESS DESCRIPTION: Specialty School Umbrella

ENDORSEMENTS ATTACHED TO THIS POLICY

SEE ATTACHED SCHEDULE

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\$ 2,100.00

Not Applicable

SCHEDULE OF UNDERLYING INSURANCE							
Employers' Liability	/						
Company:							
Policy Number:							
Policy Period:							
Minimum Applicable	Limits						
Bodily injury by a	accident		\$			Each Accident	
Bodily injury by c	lisease		\$			Each Employee	
Bodily injury by c	lisease		\$			Policy Limit	
Commercial Genera	al Liability			X Occurrence		Claims-Made	
Company:	Philadelphia	Indemnitv	Ins		v		
	PHPK2462589				-2		
Policy Period:	10/22/2022	10/22/2	023				
Retroactive Date: N							
Minimum Applicable		_					
General Aggrega			\$	3,00	00,000		
00 0	ted Operations Age	gregate	\$		00,000	_	
Personal And Ad			\$	1,00		_	
Each Occurrence			\$		0,000	-	
			-	•	·	_	
Commercial Auto L	iability						
Company:	Philadelphia	Indemnity	Ins	urance Compan	ny		
Policy Number:	PHPK2462589						
Policy Period:	10/22/2022	10/22/2	023				
Minimum Applicable	Limits						
	te Limit For Other	Than Autos					
(if applicable)			\$	Not Appli		-	
Each Accident			\$_	1,00	00,000	_	
Professional Liabili	ty					Claims-Made	
Company:							
Company: Policy Number:							
Policy Period:							
Retroactive Date:	Retroactive Date:						
Minimum Applicable	Minimum Applicable Limits						
:			_\$ _			_	
			_\$			_	

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Employee Benefits Liability		□ Occurrence	Claims-Made
Company:			
Policy Number:			
Policy Period:			
Retroactive Date:			
Minimum Applicable Limits			
	<u>\$</u>		
	\$		
Abusive Conduct Liability			
Company:			
Policy Number:			
Policy Period:			
Retroactive Date:			
Minimum Applicable Limits	^		
	\$		
Directors & Officers Liability			Claims-Made
Company:			
Policy Number:			
Policy Period:			
Retroactive Date:			
Minimum Applicable Limits			
	\$		
	\$		
Liquor Liability			Claims-Made
Company: Policy Number:			
Policy Period:			
Retroactive Date:			
Minimum Applicable Limits			
	\$		
	\$		
	Ŷ _		

Watercraft Liability		Occurrence	□ Claims-Made
Company:			
Policy Number:			
Policy Period:			
Retroactive Date:			
Minimum Applicable Limits			
·	\$		
·	\$		
Other Coverages Not Included in Above			□ Claims-Made
Company:		-	
Policy Number:			
Policy Period:			
Retroactive Date:			
Minimum Applicable Limits			
	_\$		
	\$		

THESE DECLARATIONS, TOGETHER WITH THE COMMON POLICY CONDITIONS AND COVERAGE FORM(S) AND ANY ENDORSEMENT(S), COMPLETE THE ABOVE NUMBERED POLICY.

Countersigned:	Ву:		
(Date)	(Authorized Representative)		

IN WITNESS WHEREOF, we have caused this policy to be executed and attested, and, if required by state law, this policy shall not be valid unless countersigned by our authorized representative.

John W. Glomb, Jr. President & CEO

Secretary

Form Schedule – Umbrella Liability

Policy Number: PHUB831965

Forms and Endorsements applying to this Coverage Part and made a part of this policy at time of issue:

Form	Edition	Description
PI-CXL-002	0519	Commercial Umbrella Liability Ins Policy Declarations
PI-CXL-001	0314	Commercial Umbrella Liability Insurance Policy
PI-CXL-004	0119	Directors And Officers Liability Exclusion
PI-CXL-006	0912	Employers Liability (Stop Gap) Exclusion
PI-CXL-007	0519	Abuse Or Molestation Exclusion
PI-CXL-025	0912	Absolute Liquor Liability Exclusion
PI-CXL-032	0912	Fungi Or Bacteria Exclusion
PI-CXL-039	0115	Cap On Losses From Certified Acts Of Terrorism
PI-CXL-041	0516	General Liability Follow Form Endorsement
PI-CXL-047	1014	Medical Professional Liability Exclusion
PI-CXL-068	0912	Employee Benefits Liability Exclusion
PI-CXL-075	0314	Lead Liability Exclusion
PI-CXL-088	0314	Access Or Disclosure Of Confidential Info W/Exception
PI-CXL-092	0119	Automobile Liability (Sublimit)
PI-CXL-099	0116	Recording And Distribution Of Material Or Information
PI-CXL-100	0119	Absolute Cyber Liability And Electronic Exclusion
PI-CXL-111	0119	Limit Of Ins Excl Clause Minimum Limit Requirement
PI-CXL-113	0118	Per Location / Per Project Agg Limit Of Ins Exclusion
PI-CXL-117	0119	Silica Or Silica-Related Dust Exclusion
PI-CXL-CA 1	0912	California Changes - Cancellation And Nonrenewal
PI-CXL-CA 2	0912	California Changes
PI-UMTER-DN	1220	Disclosure Notice Of Terrorism Ins Cov Rejection Opt