



Clear Hills County

Effective Date: October 27, 2020	Policy Number 1226
Title: Additional Named Insureds Program	

1. **Policy Statement:**

- 1.1. Clear Hills County may allow registered not for profit community groups, located within Clear Hills County, to purchase insurance under the County insurance policies as an Additional Named Insured (ANI).

2. **Purpose:**

- 2.1. To provide an affordable insurance option to registered not for profit community groups.

3. **Conditions**

- 3.1. Requests for addition to the County's insurance policies must be in writing and must be approved by resolution of Council.
- 3.2. All applications must be approved by the County's insurance provider.
- 3.3. Additional Named Insured's must sign a memorandum of agreement between themselves and the County.
- 3.4. Additional Named Insured's will be invoiced by the County for the cost of their insurance premiums. Any Additional Named Insured's who have insurance invoices/finance charges that remain unpaid for more than 60 days will have their insurance coverage cancelled and will no longer be able to participate in the County's ANI program.
- 3.5. ANI insurance policies will be renewed on an annual basis. Should an Additional Named Insured require significant adjustments to its policy coverage due to change in operations, facilities etc., they shall contact, in writing, the County in advance of these changes being implemented.
- 3.6. Additional Named Insured's must have representation at ANI insurance/risk management training and workshops if such workshops are presented within the jurisdiction of the County.
- 3.7. Additional Named Insured's must send copies of their minutes to the County within 30 days of their meetings.

- 3.8. All incidents, no matter how minor they appear, that occur at or through the Additional Named Insured's operations or premises, are to be reported directly to the County within 48 hours of detection.
- 3.9. Additional Named Insured's will not engage in any activity that differs from its current and regular course of operations, without notification to the County.
- 3.10. Additional Named Insured's must fully complete and return all questionnaires, information requests etc. requested by the County and the County's insurance provider, by the deadlines set out in the request. Failure to fully complete and return these information requests by the required deadlines will result in the cancellation of the Additional Named Insured's insurance coverage and the Additional Named Insured will no longer be able to participate in the County's ANI program.
- 3.11. Clear Hills County and the County's insurance provider reserves the right to terminate any policy obtained via "additional insured" coverage by issuance of 30 days written notice commencing the date of the issuance of the written notice.

4. End of Policy

ADOPTED:
Resolution C563-20(10-27-20)

Date: October 27, 2020