



EXHIBIT B
INSURANCE REQUIREMENTS FOR SUBCONTRACTORS
WORKERS COMPENSATION & GENERAL LIABILITY

Insurance Certificates are required for each project on which you are working. The name of the project and address must be on the Certificate, as outlined below.

Additional Requirements Effective Immediately:

Additional Insured – Owners, Lessees or Contractors -Automatic Status for Other Parties when required in Written Construction Agreement Form #CG2038 04 13 (or equivalent)

Additional Insured – Owners, Lessees or Contractors -Automatic Status for Other Parties when required in Written Construction Agreement Form #CG2040 12 19 (or equivalent)

Primary and Non-Contributory Endorsement

Waiver of Subrogation in favor of GTL Construction, LLC

Copy of page Declaration/Endorsement Schedule

Policy must not contain Action over Exclusion (labor law) clause

Per Project aggregate must be included on General Liability Policy

The following exclusions are prohibited from being included in the General & Excess Liability policies:

- (1) 'gravity related' injuries;
- (2) injuries sustained by an employee of an/any insured;
- (3) liability assumed by contract
- (4) height limitation or
- (5) territory restriction.

⇒ **GENERAL LIABILITY** insurance MUST be equal to or greater than the values listed:

General Aggregate	\$2,000,000
Products/Comp Operations	\$2,000,000
Each Occurrence	\$1,000,000
Personal/Adv Injury	\$2,000,000
Fire Damage	\$ 50,000
Medical Expenses	\$ 5,000
Auto Liability Comb Single Limit	\$1,000,000
Excess Liability	\$5,000,000

CERTIFICATE HOLDER: GTL Construction, LLC
1241 Mamaroneck Avenue
White Plains, New York 10605

ADDITIONAL INSURED: (to be stated in the description box)

GTL Construction, LLC and *[Insert Companies/Additional Insured Provided in Client IR's]* and its officers and directors, as well as all related subsidiaries and entities are included as Additional Insured for Ongoing and Completed Operations on a Primary & Non-Contributory basis as required by written contract. Waiver of Subrogation is included in favor of the Additional Insureds.

JOB: *[Project Number & Name]*



⇒ **WORKERS COMPENSATION INSURANCE**

The certificate must include the following statement for Workers Compensation: "Coverage has been extended for work performed in [*The State of this Project*] and listed under section 3A of the Workers Compensation Rider."

In the case the Subcontractor's WC is through the NY State Insurance Fund and the Project is located in a State other than New York, the subcontractor is required to have WC for that State and listed under section 3A of the Workers Compensation Rider.

⇒ **VEHICLE INSURANCE** for all owned, hired and non-owned vehicles

All current certificates and hold harmless agreements must be submitted to GTL's office BEFORE commencement of work. NO EXCEPTIONS. PLEASE NOTE: ANY PAYMENTS DUE FOR YOUR ACCOUNT WILL BE HELD UNTIL ALL INSURANCE REQUIREMENTS HAVE BEEN MET.