



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/25/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Colonial Western Insurance Agency 751 Daily Dr. Suite 230 Camarillo, CA 93010	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): (800) 272-3256	FAX (A/C, No): (805) 388-7138	
	<b>E-MAIL ADDRESS:</b>		
<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>	
<b>INSURED</b>  C.A. Buchen Corp. 9231 Glenoaks Blvd. Sun Valley, CA 91352	<b>INSURER A : Travelers Indemnity Co of CT</b>		<b>25682</b>
	<b>INSURER B : Travelers Prop Cas Co of America</b>		<b>25674</b>
	<b>INSURER C : Everest National Ins Co</b>		<b>10120</b>
	<b>INSURER D :</b>		
	<b>INSURER E :</b>		
<b>INSURER F :</b>			

### COVERAGES

### CERTIFICATE NUMBER:

### REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED 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 HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.


INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X	X	630-153D2230-TCT-15	07/01/2015	07/01/2016	EACH OCCURRENCE \$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:						MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 10,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 <b>EBL EACH EMP LI \$ 1,000,000</b>
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			BA-153D2230-15-CAG	07/01/2015	07/01/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE			CUP-153D2230-TIL-15	07/01/2015	07/01/2016	EACH OCCURRENCE \$ 9,000,000 AGGREGATE \$ 9,000,000 \$
C	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	7600015186151	07/01/2015	07/01/2016	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Re: #2867 - LAX Terminal 1 - Quicksilver - I Love LA - Treat Me Sweet Premier Interior Development, Inc., and their respective officers and employees; Soto & Sanchez; Rivers & Christian; Westfield Concession Management, LLC; Westfield Development, Inc. LLC; Westfield, LLC; Westfield American Limited Partnership; Westfield America, Inc.; City of Los Angeles; the City of Los Angeles Department of Airports; the Board of Airport Commissioners of the Department of Airports; Los Angeles World Airports and respective officers and agents and all of their respective elected officials, advisory board members, and committee members thereof and respective employees; and any and all of their respective members, shareholders, trustees, parents, partners, joint ventures, representatives, subsidiaries and affiliates; and any and all of their respective successors and assigns are named as Additional Insured under the General Liability per the attached endorsements. This Insurance is Primary SEE ATTACHED ACORD 101

### CERTIFICATE HOLDER

### CANCELLATION

Premier Interior Development, Inc. 771 Chambers Lane, Unit 300 Simi Valley, CA 93065	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

**ADDITIONAL REMARKS SCHEDULE**

AGENCY <b>Colonial Western Insurance Agency</b>		NAMED INSURED <b>C.A. Buchen Corp. 9231 Glenoaks Blvd. Sun Valley, CA 91352</b>	
POLICY NUMBER <b>SEE PAGE 1</b>		EFFECTIVE DATE: <b>SEE PAGE 1</b>	
CARRIER <b>SEE PAGE 1</b>	NAIC CODE <b>SEE P 1</b>		

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

**Description of Operations/Locations/Vehicles:  
and Non-Contributory per the attached endorsement. A Waiver of Subrogation applies to the General Liability and Workers  
Compensation per the attached endorsements.**

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **ADDITIONAL INSURED (CONTRACTORS)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### **SCHEDULE**

#### **NAME OF PERSON(S) OR ORGANIZATION(S):**

Premier Interior Development, Inc., and their respective officers and employees; Soto & Sanchez; Rivers & Christian; Westfield Concession Management, LLC; Westfield Development, Inc. LLC; Westfield, LLC; Westfield American Limited Partnership; Westfield America, Inc.; City of Los Angeles; the City of Los Angeles Department of Airports; the Board of Airport Commissioners of the Department of Airports; Los Angeles World Airports and respective officers and agents and all of their respective elected officials, advisory board members, and committee members thereof and respective employees; and any and all of their respective members, shareholders, trustees, parents, partners, joint ventures, representatives, subsidiaries and affiliates; and any and all of their respective successors and assigns

#### **PROJECT/LOCATION OF COVERED OPERATIONS:**

#2867 - LAX Terminal 1 - Quicksilver - I Love LA - Treat Me Sweet

1. WHO IS AN INSURED – (Section II) is amended to include the person or organization shown in the Schedule above, but:
  - a) Only with respect to liability for "bodily injury", "property damage" or "personal injury"; and
  - b) If, and only to the extent that, the injury or damage is caused by acts or omissions of you or your subcontractor in the performance of "your work" on or for the project, or at the location, shown in the Schedule. The person or organization does not qualify as an additional insured with respect to the independent acts or omissions of such person or organization.
2. The insurance provided to the additional insured by this endorsement is limited as follows:
  - a) In the event that the Limits of Insurance of this Coverage Part shown in the Declarations exceed the limits of liability required by a "written contract requiring insurance" for that additional insured, the insurance provided to the additional insured shall be limited to the limits of liability required by that "written contract requiring insurance". This endorsement shall not increase the limits of insurance described in Section III – Limits Of Insurance.
  - b) The insurance provided to the additional insured does not apply to "bodily injury", "property damage" or "personal injury" arising out of the rendering of, or failure to render, any professional architectural, engineering or surveying services, including:
    - i. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders or change orders, or the preparing, approving, or failing to prepare or approve, drawings and specifications; and
    - ii. Supervisory, inspection, architectural or engineering activities.
  - c) The insurance provided to the additional insured does not apply to "bodily injury" or "property damage" caused by "your work" and included in the "products-completed operations hazard" unless a "written contract requiring insurance" specifically requires you to provide such coverage for that additional insured, and then the insurance provided to the additional insured applies only to such "bodily injury" or "property damage" that occurs before the end of the period of time for which the "written contract requiring insurance" requires you to provide such coverage

## COMMERCIAL GENERAL LIABILITY

or the end of the policy period, whichever is earlier.

3. The insurance provided to the additional insured by this endorsement is excess over any valid and collectible "other insurance", whether primary, excess, contingent or on any other basis, that is available to the additional insured for a loss we cover under this endorsement. However, if a "written contract requiring insurance" for that additional insured specifically requires that this insurance apply on a primary basis or a primary and non-contributory basis, this insurance is primary to "other insurance" available to the additional insured which covers that person or organization as a named insured for such loss, and we will not share with that "other insurance". But the insurance provided to the additional insured by this endorsement still is excess over any valid and collectible "other insurance", whether primary, excess, contingent or on any other basis, that is available to the additional insured when that person or organization is an additional insured under such "other insurance".

4. As a condition of coverage provided to the additional insured by this endorsement:

- a) The additional insured must give us written notice as soon as practicable of an "occurrence" or an offense which may result in a claim. To the extent possible, such notice should include:
- i. How, when and where the "occurrence" or offense took place;
  - ii. The names and addresses of any injured persons and witnesses; and
  - iii. The nature and location of any injury or damage arising out of the "occurrence" or offense.
- b) If a claim is made or "suit" is brought against the additional insured, the additional insured must:

- i. Immediately record the specifics of the claim or "suit" and the date received; and
- ii. Notify us as soon as practicable.

The additional insured must see to it that we receive written notice of the claim or "suit" as soon as practicable.

- c) The additional insured must immediately send us copies of all legal papers received in connection with the claim or "suit", cooperate with us in the investigation or settlement of the claim or defense against the "suit", and otherwise comply with all policy conditions.
- d) The additional insured must tender the defense and indemnity of any claim or "suit" to any provider of "other insurance" which would cover the additional insured for a loss we cover under this endorsement. However, this condition does not affect whether the insurance provided to the additional insured by this endorsement is primary to "other insurance" available to the additional insured which covers that person or organization as a named insured as described in paragraph 3. above.

5. The following definition is added to SECTION V. – DEFINITIONS:

"Written contract requiring insurance" means that part of any written contract or agreement under which you are required to include a person or organization as an additional insured on this Coverage Part, provided that the "bodily injury" and "property damage" occurs and the "personal injury" is caused by an offense committed:

- a. After the signing and execution of the contract or agreement by you;
- b. While that part of the contract or agreement is in effect; and
- c. Before the end of the policy period.

**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):**

Premier Interior Development, Inc., and their respective officers and employees; Soto & Sanchez; Rivers & Christian; Westfield Concession Management, LLC; Westfield Development, Inc. LLC; Westfield, LLC; Westfield American Limited Partnership; Westfield America, Inc.; City of Los Angeles; the City of Los Angeles Department of Airports; the Board of Airport Commissioners of the Department of Airports; Los Angeles World Airports and respective officers and agents and all of their respective elected officials, advisory board members, and committee members thereof and respective employees; and any and all of their respective members, shareholders, trustees, parents, partners, joint ventures', representatives, subsidiaries and affiliates; and any and all of their respective successors and assigns

**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", "personal injury" or "advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.

POLICY NUMBER: 630-153D2230-TCT-15

COMMERCIAL GENERAL LIABILITY

ISSUE DATE:

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### **SCHEDULE**

**Name of Person or Organization:**

Premier Interior Development, Inc., and their respective officers and employees; Soto & Sanchez; Rivers & Christian; Westfield Concession Management, LLC; Westfield Development, Inc. LLC; Westfield, LLC; Westfield American Limited Partnership; Westfield America, Inc.; City of Los Angeles; the City of Los Angeles Department of Airports; the Board of Airport Commissioners of the Department of Airports; Los Angeles World Airports and respective officers and agents and all of their respective elected officials, advisory board members, and committee members thereof and respective employees; and any and all of their respective members, shareholders, trustees, parents, partners, joint ventures', representatives, subsidiaries and affiliates; and any and all of their respective successors and assigns

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

The TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US Condition (Section IV-COMMERCIAL GENERAL LIABILITY CONDITIONS) is amended by the addition of the following:

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or

damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazards." This waiver applies only to the person or organization shown in the Schedule above.

**WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT – CALIFORNIA**

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

You must maintain payroll records accurately segregating the remuneration of your employees while engaged in the work described in the Schedule.

The additional premium for this endorsement shall be 0% of the California workers' compensation premium otherwise due on such remuneration.

PERSON OR ORGANIZATION	SCHEDULE	JOB DESCRIPTION
PREMIER INTERIOR DEVELOPMENT, INC., AND THEIR RESPECTIVE OFFICERS AND EMPLOYEES; SOTO & SANCHEZ; RIVERS & CHRISTIAN; WESTFIELD CONCESSION MANAGEMENT, LLC; WESTFIELD DEVELOPMENT, INC. LLC; WESTFIELD, LLC; WESTFIELD AMERICAN LIMITED PARTNERSHIP; WESTFIELD AMERICA, INC.; CITY OF LOS ANGELES; THE CITY OF LOS ANGELES DEPARTMENT OF AIRPORTS; THE BOARD OF AIRPORT COMMISSIONERS OF THE DEPARTMENT OF AIRPORTS; LOS ANGELES WORLD AIRPORTS AND RESPECTIVE OFFICERS AND AGENTS AND ALL OF THEIR RESPECTIVE ELECTED OFFICIALS, ADVISORY BOARD MEMBERS, AND COMMITTEE MEMBERS THEREOF AND RESPECTIVE EMPLOYEES; AND ANY AND ALL OF THEIR RESPECTIVE MEMBERS, SHAREHOLDERS, TRUSTEES, PARENTS, PARTNERS, JOINT VENTURES', REPRESENTATIVES, SUBSIDIARIES AND AFFILIATES; AND ANY AND ALL OF THEIR RESPECTIVE SUCCESSORS AND ASSIGNS 771 CHAMBERS LANE, UNIT 300 SIMI VALLEY, CA 93065		JOB #2867 LAX TERMINAL 1 - QUICKSILVER - I LOVE LA - TREAT ME SWEET

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated. (The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective 08-25-15 Policy No. 7600015186151 Endorsement No.  
 Insured C A BUCHEN CORP Premium \$ INCL.

Insurance Company **EVEREST NATIONAL INSURANCE COMPANY**  
 Countersigned By: \_\_\_\_\_