

INSURANCE REQUIREMENTS

Hand Held Films **DOES NOT ACCEPT** Insurance policies that contain the **THEFT from UNATTENDED VEHICLE EXCLUSION**. Please check with your insurance broker regarding this coverage.

All rented equipment should be insured and an insurance certificate must be provided prior to the rental and/or on each renewal term of the policy. Hand Held Films does not provide, rent, or sell insurance.

INSURANCE CERTIFICATES must clearly state the following:

- 1. Hand Held Films must be named as the Certificate Holder, "Loss Payee" with regard to our interest in the property coverage and "Additional Insured" with regard to liability insurance.
- 2. Certificate Holder is: Hand Held Films, Inc. 129 West 27th Street, Storefront & 3rd floor, New York, NY 10001
- Property Coverage Limit and Deductible specific to "Miscellaneous or Rented Equipment". Coverage Limit must exceed the total replacement cost of equipment rented for your production.
- 4. Policy must be valid for the full duration of the rental. Must include the pickup and return dates.
- 5. Coverage is all risk.
- 6. Coverage is written on replacement cost basis.
- 7. Coverage is written on a Worldwide Basis. If not on a Worldwide Basis, please specify coverage location.
- 8. Coverage includes transit.
- 9. No theft from unattended vehicle exclusion.
- 10. General Liability limit. At least \$1,000,000 limit if filming underwater, from an aircraft, or out of country.
- 11. Auto insurance (Required when renting Hand Held Films' Trucks)
 - a) Coverage for Hired Autos, Non-Owned Autos
 - b) Automobile Liability Limit & Deductible
 - c) Physical Damage no less than 125K per vehicle rented
- Statement to provide 30 days written notice to Hand Held Films, Inc. in the event of cancellation or changes in coverage specifics.

An agent or representative of the insurance company issuing the certificate must sign the insurance certificate. See Sample Certificate attached for reference.

CREDIT CARD HOLDS IN PLACE OF INSURANCE We may accept credit card holds in place of insurance for small, short-term rentals. This is available to our customers as long as their credit card has enough available funds to cover the full replacement cost of the equipment. Please speak to one of our rental agents regarding this method of insurance.

Feel free to contact accounting@handheldfilms.com with questions or concerns regarding your insurance certificate requirements.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)	
XX/XX/XXXX	

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).

PRODUCER	CONTACT NAME:	
XXXXXXXXXXXXXXX	PHONE FAX (A/C, No, Ext): (A/C, No):	
XXXXXXXXXXXXXXX	E-MAIL ADDRESS:	
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	INSURER(S) AFFORDING COVERAGE	NAIC #
XXXXXXXXXXXXXXX	INSURER A: XXXXXXXXXXXXXXXX	
INSURED	INSURER B:	
XXXXXXXXXXXXXX	INSURER C:	
XXXXXXXXXXXXXX	INSURER D:	
70000000000000	INSURER E:	
XXXXXXXXXXXXXX	INSURER F:	
COVERAGES CERTIFICATE NUMBER.	DEVICION NUMBER.	

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 SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
V	GENERAL LIABILITY	INSK WVD					
^	V V		XXXXXXXX	XXXX	XXXX	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED	
	COMMERCIAL GENERAL LIABILITY					PREMISES (Ea occurrence) \$ 100,000	
	CLAIMS-MADE X OCCUR					MED EXP (Any one person) \$ 5,000	
						PERSONAL & ADV INJURY \$ 1,000,000	
						GENERAL AGGREGATE \$ 2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG \$ 1,000,000	
	POLICY PRO- JECT LOC					\$	
X	AUTOMOBILE LIABILITY		XXXXXXXXXX	XXXX	XXXX	COMBINED SINGLE LIMIT (Ea accident) \$ 1.000.000	
	ANY AUTO					BODILY INJURY (Per person) \$	
	ALL OWNED SCHEDULED AUTOS AUTOS		(DECLUBED ONL)	/ IE		BODILY INJURY (Per accident) \$	
	X HIRED AUTOS NON-OWNED AUTOS		(REQUIRED ONL)	r IF		PROPERTY DAMAGE (Per accident) \$	
			VEHICLES ARE R	ENTED.)		\$	
	UMBRELLA LIAB OCCUR			ĺ ,		EACH OCCURRENCE \$	
	EXCESS LIAB CLAIMS-MADE					AGGREGATE \$	
	DED RETENTION \$					\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					WC STATU- OTH- TORY LIMITS ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE					E.L. EACH ACCIDENT \$	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A				E.L. DISEASE - EA EMPLOYEE \$	
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT \$	
X	MISC EQUIP/TRANSIT;		XXXXXXXX	XXXX	XXXXX	LIMIT	
	SPECIAL FORM:					DEDUCTIBLE	
	WORLDWIDE: REPLACE	MENT	COST			= == = = = : = ==	

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

THE CERTIFICATE HOLDER IS INCLUDED AS A LOSS PAYEE UNDER THE PROPERTY POLICY AND AS AN ADDITIONAL INSURED UNDER THE GENERAL LIABILITY POLICY AS RESPECTS CLAIMS ARISING OUT OF THE OPERATIONS OF THE NAMED INSURED FOR THE MAINTENANCE, OPERATION OR USE OF THE EQUIPMENT BY THE NAMED INSURED. THE POLICIES DO NOT INCLUDE AN UNATTENDED VEHICLE EXCLUSION.

CERTIFICATE HOLDER	CANCELLATION
Hand Held Films, Inc. 129 West 27th Street Storefront & 3rd Floor	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
	SIGNATURE

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