



## EVIDENCE OF COVERAGE

DATE (MM/DD/YYYY)

2/1/2022

This Evidence of Coverage is used as a matter of information only and confers no rights upon the Certificate Holder. This Evidence of Coverage does not amend, extend, or alter the coverage afforded by the memoranda listed below.

**JOINT POWERS AUTHORITY (JPA)**

Yolo County Public Agency  
Risk Management Insurance Authority  
77 W. Lincoln Avenue  
Woodland, CA 95695

CONTACT NAME: Lily Vieck

lviek@ycparmia.org

PHONE: 530-666-4456 ext. 201

FAX: 530-666-4491

**JPA MEMBER (Covered Party)**

Valley Clean Energy Alliance  
604 2nd St  
Davis CA 95616

This is to Certify that the Yolo County Public Agency Risk Management Insurance Authority (YCPARMIA) Memorandum of Coverages listed below have been issued to the Covered Party named above for the period indicated. The coverage is in effect & is provided through participation in a risk sharing joint powers authority. Notwithstanding any requirement, term, or condition of any contract or other document with respect to which this Evidence of Coverage may be used or may pertain, the coverages afforded by the Memorandum of Coverages described herein are subject to all the terms, exclusions, and conditions of such Memorandum of Coverages.

CERTIFICATE NUMBER: 66565948

TYPE OF COVERAGE	ADDL INSR	MEMORANDUM NUMBER (MOC)	EFFECTIVE (MM/DD/YYYY)	EXPIRATION 12:01a.m.	LIMIT OF LIABILITY / COVERAGE	
<b>PUBLIC ENTITY LIABILITY</b> <input checked="" type="checkbox"/> OCCURRENCE <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		YCP LIAB 2021	7/1/2021	7/1/2022	COMBINED SINGLE LIMIT PER OCCURRENCE	\$ 1,000,000
					AGGREGATE	\$
						\$
						\$
						\$
<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		YCP LIAB 2021	7/1/2021	7/1/2022	COMBINED SINGLE LIMIT PER OCCURRENCE	\$ 1,000,000
						\$
						\$
						\$
						\$
<b>PROPERTY</b> <input checked="" type="checkbox"/> BUILDING / CONTENTS / BI <input checked="" type="checkbox"/> ALL RISK LESS EXCLUSIONS <input checked="" type="checkbox"/> AUTOMOTIVE PHYSICAL DAMAGE <input type="checkbox"/> COMPREHENSIVE / COLLISION		YCP PROP 2021 Excess Property via PRISM	7/1/2021	7/1/2022	REPLACEMENT COST SUBJECT TO COVERAGE LIMITS, TERMS, AND CONDITIONS	
						\$ 25,000
						\$
					REPLACEMENT COST VALUE	\$
						\$
<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> <input checked="" type="checkbox"/> WC STATUTORY LIMITS	N/A	YCP WC 2021 Excess WC via PRISM	7/1/2021	7/1/2022	EACH ACCIDENT	\$ 1,000,000
					PER EMPLOYEE	\$ 1,000,000
					COVERAGE LIMIT	\$ 1,000,000
<b>OTHER</b> <input type="checkbox"/> EMPLOYEE DISHONESTY (CRIME) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					SUBJECT TO COVERAGE LIMITS, TERMS, AND CONDITIONS	
						\$
						\$
						\$
						\$

**DESCRIPTION OF COVERED ACTIVITY / ADDITIONAL REMARKS:****THIS CERTIFICATE CONFERS NO ADDITIONAL INSURED RIGHTS UPON THE CERTIFICATE HOLDER.**

Activity Start Date: Current Activity End Date: Current  
Evidence only

**CERTIFICATE HOLDER**

Evidence of Coverage

**CANCELLATION**

Should any of the above coverages for the Covered Party be changed or withdrawn prior to the expiration date issued above, YCPARMIA will mail 30 days written notice to the Certificate Holder, but failure to mail such notice shall impose no obligation or liability of any kind upon YCPARMIA, its agents, or representatives.

AUTHORIZED REPRESENTATIVE: Marilyn Kelley