



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

01/06/2022

**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 have ADDITIONAL INSURED provisions or 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> MARSH USA INC 1717 Arch Street Philadelphia, PA 19103 Attn: Philadelphia.certs@marsh.com / Fax: (212) 948-0360 Attn: Philadelphia.certs@marsh.com / Fax: (212) 948-0360 CN118025105-ALL-STAND-22-23	<b>CONTACT NAME:</b> Marsh   U.S. Operations <b>PHONE (A/C, No, Ext):</b> 866-966-4664 <b>E-MAIL ADDRESS:</b> Philadelphia.Certs@marsh.com <b>FAX (A/C, No):</b>													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Indian Harbor Insurance Company</td> <td>36940</td> </tr> <tr> <td>INSURER B : Greenwich Insurance Company</td> <td>22322</td> </tr> <tr> <td>INSURER C : XL Insurance America</td> <td>24554</td> </tr> <tr> <td>INSURER D : National Fire &amp; Marine Insurance Company</td> <td>20079</td> </tr> <tr> <td>INSURER E : N/A</td> <td>N/A</td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Indian Harbor Insurance Company	36940	INSURER B : Greenwich Insurance Company	22322	INSURER C : XL Insurance America	24554	INSURER D : National Fire & Marine Insurance Company	20079	INSURER E : N/A	N/A	INSURER F :
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**COVERAGES****CERTIFICATE NUMBER:**

CLE-006453532-18

**REVISION NUMBER:** 0

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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> CONTRACTUAL LIABILITY <input checked="" type="checkbox"/> SIR \$1,750,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			RES943799402	01/01/2022	01/01/2023	EACH OCCURRENCE \$ 30,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 30,000,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 30,000,000 GENERAL AGGREGATE \$ 40,000,000 PRODUCTS - COMP/OP AGG \$ 40,000,000
B	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			RAD943781805	01/01/2022	01/01/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
D	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			42XSF10009009 Excess of General Liability, Auto Liability, and Workers Comp	01/01/2022	01/01/2023	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	RWD3001203-06(AOS) RWR300120406(WI)	01/01/2022 01/01/2022	01/01/2023 01/01/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Professional Liability			RES943799402	01/01/2022	01/01/2023	Limit 2,000,000 SIR 1,750,000

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

Re: As Per Contract or Agreement on File with Insured.

City of Redondo Beach is included as additional insured where required by written contract with respect to General Liability and Auto Liability. Liability coverage shall be primary and non-contributory where required to coverage shall be primary and non-contributory where required by written contract. Waiver of subrogation is applicable where required by written contract with respect to General Liability, Auto Liability, and Workers Compensation.

**CERTIFICATE HOLDER**
 City of Redondo Beach  
 415 Diamond Street  
 Redondo Beach, CA 90277
**CANCELLATION**

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  
 of Marsh USA Inc.
*Marsh USA Inc.*

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**ADDITIONAL REMARKS SCHEDULE**

<b>AGENCY</b> MARSH USA INC		<b>NAMED INSURED</b> Allied Universal Topco, LLC (See Attached for Additional Named Insureds) 161 Washington Street, Suite 600 Conshohocken, PA 19428	
<b>POLICY NUMBER</b>		<b>EFFECTIVE DATE:</b>	
<b>CARRIER</b>	<b>NAIC CODE</b>		

**ADDITIONAL REMARKS**

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

Excess Workers Compensation  
 Policy No.: RWE943548206  
 Insurer: XL Specialty Insurance Company  
 Effective Dates: 1/1/2022 - 1/1/2023  
 Limit:  
 Employers Liability Each Accident: \$1,000,000  
 Employers Liability Disease-Policy Limit: \$1,000,000  
 Employers Liability Disease-Each Employee: \$1,000,000  
 SIR: \$1,000,000  
 Crime  
 Policy No.: 01-602-29-33  
 Insurer: National Union Fire Insurance Co.  
 Effective Dates: 09/15/2021 - 09/15/2022  
 Limit:  
 Employee Theft or Dishonesty: \$2,000,000  
 Clients Property: \$2,000,000  
 Deductible: \$1,000,000  
 Contractors Pollution Liability  
 Policy No.: CPO13303734  
 Insurer: Commerce and Industry Insurance Company  
 Effective Dates: 11/01/2021 - 11/01/2022  
 Limit: \$5,000,000  
 Deductible: \$250,000  
 The General Liability and Professional Liability policies evidenced above share in the limits shown. The limits do not apply separately to the individual coverages

Cypress Private Security LP, Cypress Security LLC as an additional insured as required by written contract.u0000

coverages

Cypress Private Security LP, Cypress Security LLC as an additional insured as required by written contract.

**Named Insured:**

Allied Universal Topco LLC

**Additional Named Insured:**

Adesta LLC  
Advent Systems, LLC  
Advent Systems, LLC, dba Allied Universal  
Technology Services  
Allied Security Holdings LLC  
Allied Universal Compliance and Investigations,  
Inc.  
Allied Universal Compliance and Investigations,  
Inc., fka G4S Compliance & Investigations, Inc.  
Allied Universal Executive Protection and  
Intelligence Services, Inc.  
Allied Universal Finance Corporation  
Allied Universal Holdco LLC  
Allied Universal Risk Advisory and Consulting  
Services, Inc.  
Allied Universal Sideco, LLC  
AlliedBarton (NC) LLC  
AlliedBarton (NC) LLC, dba Allied Universal  
Security Services  
AlliedBarton Security Services LLC  
AlliedBarton Security Services LLC, dba Allied  
Universal Security Services  
AMAG Technologies, Inc.  
American Security Programs, Inc.  
Central Defense Services, LLC  
ERMC LLC  
ERMC of America, LLC  
FJC Security Services, Inc.  
FJC Security Services, Inc., dba Allied Universal  
Security Services  
G4S Holding One LLC  
G4S Retail Solutions (Canada) Inc.  
G4S Retail Solutions (USA) Inc.  
G4S Secure Integration LLC  
G4S Secure Integration LLC dba Allied  
Universal Technology Services  
G4S Secure Solutions International Inc.  
G4S Secure Solutions (USA) Inc.  
G4S Secure Solutions (USA) Inc., dba Allied  
Universal  
G4S Technology Software Solutions LLC  
Intelligent Access Systems of North Carolina,  
LLC  
Intelligent Access Systems of North Carolina,  
LLC, dba Allied Universal Technology Services  
Intelligent Access Systems of North Carolina,  
LLC, dba Securadyne Systems Mid-Atlantic  
Michael Stapleton Associates, Ltd.

Michael Stapleton Associates, Ltd., dba MSA  
Security  
Millard Mall Services Holdco LLC  
MSA Investigations, Inc.  
MSA Security, Inc.  
MSA Security Canada Limited  
MSA Security Limited  
NAKI Cleaning Services, LLC  
Peoplemark, Inc.  
RONCO Consulting Corporation  
SecurAmerica, LLC  
Securadyne Systems Intermediate LLC  
Securadyne Systems Intermediate LLC, dba  
Allied Universal Technology Services  
Securadyne Systems Texas LLC  
Securadyne Systems Texas LLC, dba Allied  
Universal Technology Services  
SFI Electronics, LLC  
SFI Electronics, LLC, dba Allied Universal  
Security Systems  
SFI Electronics, LLC, dba Allied Universal  
Technology Services  
SFI Electronics, LLC, dba Universal Protection  
Security Systems  
SOS Security LLC  
SOS Security LLC, dba Allied Universal Risk  
Advisory and Consulting Services  
SOS Security LLC, dba Allied Universal Security  
Services  
Spectaguard Acquisition LLC  
Staff Pro Inc.  
Staff Pro Inc., dba Allied Universal Event  
Services  
Titania Insurance Co. of America  
TMG Facilities Management, LLC  
U.S. Security Associates Holding Corp.  
Universal Building Maintenance, LLC  
Universal Building Maintenance, LLC, dba Allied  
Universal Janitorial Services  
Universal Building Maintenance, LLC, dba Allied  
Universal Landscaping Services  
Universal Protection GP, Inc.  
Universal Protection Security Systems, LP  
Universal Protection Security Systems, LP, dba  
Allied Universal Security Systems  
Universal Protection Security Systems, LP, dba  
Allied Universal Technology Services  
Universal Protection Service of Canada  
Corporation  
Universal Protection Service of Canada  
Corporation, dba Allied Universal Security  
Services of Canada

Universal Protection Service of Canada  
Corporation, dba Allied Universal Technology  
Services  
Universal Protection Service of Seattle, LLC  
Universal Protection Service of Seattle, LLC,  
dba Allied Universal Security Services  
Universal Protection Service, LLC  
Universal Protection Service, LLC, dba Allied  
Universal Risk Advisory and Consulting Services  
Universal Protection Service, LLC, dba Allied  
Universal Security Services  
Universal Protection Service, LLC, dba Allied  
Universal Security Services, LLC  
Universal Protection Service, LP  
Universal Protection Service, LP, dba Allied  
Universal Risk Advisory and Consulting Services  
Universal Protection Service, LP, dba Allied  
Universal Security Services  
Universal Protection Service, LP, dba Allied  
Universal Security Services, LP  
Universal Services of America, LP  
Universal Services of America, LP, dba Allied  
Universal  
Universal Thrive Technologies, LLC  
Universal Thrive Technologies, LLC, dba Allied  
Universal Monitoring and Response Center  
Universal Thrive Technologies, LLC, dba Allied  
Universal Technology Services  
Universal Thrive Technologies, LLC, dba Thrive  
Intelligence  
USAGM Acquisition, LLC

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

**ADDITIONAL INSURED**

This endorsement modifies insurance provided under the following:

- BUSINESS AUTO COVERAGE FORM
- MOTOR CARRIER COVERAGE FORM
- AUTO DEALERS COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

**Schedule**

<b>Additional Insured(s)</b>	<b>Work</b>
Any person or organization you have agreed to include as an additional insured under written contract, provided such contract was executed prior to the date of loss.	All Operations

**COVERED AUTOS LIABILITY COVERAGE, Who Is An Insured**, is amended to include as an "insured" the person or organization listed in the Schedule above, but only with respect to liability for "bodily injury" or "property damage" otherwise covered under this policy caused, in whole or in part, by the negligent acts or omissions of:

1. You, while using a covered "auto"; or
2. Any other person, except the additional insured or any employee or agent of the additional insured, operating a covered "auto" with your permission;

in the performance of your work as described in the Schedule above.

In no event shall any person or organization listed in the Schedule become an "insured" pursuant to this Endorsement if such person or organization is solely negligent.

IT IS FURTHER AGREED THAT IN NO EVENT SHALL ANY CONTRACT OR AGREEMENT ALTER THE CONDITIONS, COVERAGES OR EXCLUSIONS SET FORTH IN THIS POLICY.

All other terms and conditions of this policy remain unchanged.

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

**WAIVER OF TRANSFER OF RIGHTS OF RECOVERY  
AGAINST OTHERS TO US (WAIVER OF SUBROGATION)**

This endorsement modifies insurance provided under the following:

- AUTO DEALERS COVERAGE FORM
- BUSINESS AUTO COVERAGE FORM
- MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

<b>Named Insured:</b> ALLIED UNIVERSAL TOPCO, LLC
<b>Endorsement Effective Date:</b> January 1, 2022

**SCHEDULE**

<b>Name(s) Of Person(s) Or Organization(s):</b>
Any person or organization where waiver of our right to recover is required by written contract with such person or organization provided such contract was executed prior to the date of loss.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The **Transfer Of Rights Of Recovery Against Others To Us** condition does not apply to the person(s) or organization(s) shown in the Schedule, but only to the extent that subrogation is waived prior to the "accident" or the "loss" under a contract with that person or organization.

## ENDORSEMENT #050

This endorsement, effective 12:01 AM 01/01/2022

Forms part of policy number: RES943799402

Issued to: ALLIED UNIVERSAL TOPCO, LLC

By: INDIAN HARBOR INSURANCE COMPANY

### ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided by the following:

EXCESS GENERAL LIABILITY POLICY

**A. SECTION II - Who Is an Insured** is amended to include as an additional insured a person(s) or organization(s) who is required to be added by written contract or written agreement which does not require that a specific form number be used.

**B.** The insurance provided to additional insureds applies only to "bodily injury", "property damage", "professional liability" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf

In the performance of your ongoing operations for the additional insured; or "your work" performed for that

additional insured and included in the "products-completed operations hazard"

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

**C.** With respect to the insurance afforded to these additional insureds, the following is added to

Section III – Limits of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay

on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less. This endorsement shall not increase the applicable Limits of Insurance e shown in the Declarations.

**D.** The additional insured must see to it that:

1. We are notified as soon as practicable of an “occurrence” or offense that may result in a claim.
2. We receive written notice of a claim or “suit” as soon as practicable; and
3. A request for defense and indemnity of the claim or “suit” will promptly be brought against any policy issued by another insurer under which the additional insured also has rights an insured or additional insured.

**E.** This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

1. The additional insured is a Named Insured under such other insurance; and
2. You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

All other terms and conditions remain as written.



**ENDORSEMENT #24**

**This endorsement, effective 12:01 AM 01/01/2022**

**Forms part of policy number: RES943799402**

**Issued to:** ALLIED UNIVERSAL TOPCO, LLC

**By:** INDIAN HARBOR INSURANCE COMPANY

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

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY POLICY

**SCHEDULE**

**Name of person or Organization:**

Where required by written contract.

(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 RECOVERY AGAINST OTHERS TO US Condition (Section IV – 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 hazard.” This waiver applies only to the person or organization shown in the Schedule above.

All other terms and conditions remain as written.

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

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.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

Any person or organization where waiver of our right to recover is required by written contract with such person or organization provided such contract was executed prior to the date of loss.

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  
Insured  
Allied Universal Topco, LLC  
Insurance Company  
XL Insurance America, Inc.

Policy No.  
RWD3001203-06

Endorsement No.  
Premium Included

Countersigned by \_\_\_\_\_

**WC 00 03 13**  
(Ed. 4-84)