

# 1100 LOUISIANA

## CONTRACTORS/VENDORS – GROUP I INSURANCE COVERAGE REQUIREMENTS

GROUP I = Elevator/Escalator • General Contractors (large, higher risk jobs using sub-contractors) • Janitorial • Metal Refinishing • Parking • Security • Window Washing (labor and maintenance)

A Certificate of Insurance (“COI”) including the following criteria is required as a minimum for all contractors and/or vendors servicing either the 1100 Louisiana building or the 1100 Smith parking garage. COIs must be submitted to Hines prior to commencement of work.

<u>Type of Insurance:</u>	<u>Coverage Limits:</u>
• General Liability	\$1,000,000 each occurrence (combined single limit bodily injury and property damage)
• Automobile Liability	\$1,000,000 each occurrence (combined single limit bodily injury and property damage)
• Excess (Umbrella) Liability	\$5,000,000 (Group I Contractors and Vendors ONLY)
• Workers Compensation	in kind and amount as prescribed by statute (box must be checked)
• Employers’ Liability	\$1,000,000 each occurrence

**ACORD® COI Form** - The insurance industry regulatory requirements mandate that all ACORD forms users use the most current version. Per “**ACORD Forms Index (rev. 3/01/2023)**”, which can be found on their website ([www.acord.org](http://www.acord.org)), the current version of the Certificate of Liability Insurance form is still “**ACORD 25 (2016/03)**”.

**Named as Additional Insured** - Please list both the Building Owner (Fantome Tower L.P.) and Property Management (Hines Interests Limited Partnership) as Additional Insureds in either the Description field on the COI form, or on an Endorsement attached to the COI.

**Certificate Holder** – The Certificate Holder field on the COI should be filled out exactly as follows:

Fantome Tower L.P.  
Hines Interests Limited Partnership  
1100 Louisiana, Ste. 2250  
Houston, TX 77002

**Send COI to:**

**e-mail (preferred):** [Roseanne.Martinez@hines.com](mailto:Roseanne.Martinez@hines.com)

**fax (if you do not have access to e-mail):**

Hines, Attn: Roseanne Martinez

Fax: 713.759.9257 Phone: 713.759.9923