

**Devine Intermodal  
Broker Agreement with  
Independent Contractor**

**Appendix C  
Insurance Requirements**

We accept only **California Admitted Carriers** for auto liability; all others are subject to written approval. The following coverage's must be specified on the certificate **AND we must receive a copy of your CARGO POLICY for review:**

Commercial General Liability	Each Occurrence	1,000,000
	General Aggregate	2,000,000
Automobile Liability	Combined Single Limit	1,000,000
	Deductible (Maximum)	1,000
Motor Truck Cargo	Liability	100,000
	Deductible (Maximum)	1,000
Unidentified Trailer	Physical Damage (Minimum)	30,000

**MANDATORY STATEMENT**

The following wording must be included on your insurance certificate:

**“DEVINE INTERMODAL NAMED AS ADDITIONAL INSURED”**

**In the comment section of the certificate**

- List the year, make, and VIN for each covered vehicle.
- If there is a radius limitation on your policy, it must be stated on the certificate.
- Out of state coverage should also be noted on the certificate.
- Cancellation language should be amended to read the following: “Should any of the above described policies be cancelled before the expiration date thereof, the insuring company will mail or email within 30 days written notice to the Certificate Holder.” The above change can be implemented by lining out pre-printed cancellation information on the face of the certificate.

The insurance certificate holder must appear as follows and should be mailed or emailed to:

**DEVINE INTERMODAL  
P.O. BOX 980160  
WEST SACRAMENTO, CA 95798-0160  
EMAIL: [bgamble@devineintermodal.com](mailto:bgamble@devineintermodal.com)**

If you have any questions, please contact Bennie Gamble at (916) 374-1201.