Acceptance of County Insurance Requirements

Successful proposers are required to enter into a contract with the County of Sonoma and carry insurance that meets all County requirements.

Please review the Insurance Requirements attached, complete the following responses, and submit signed form with your Application:

1. I have reviewed the Insurance Requirements on behalf of my agency.
   ☐ Yes ☐ No

2. Should agency's proposal be approved for funding, agency will acquire and maintain insurance that meets the County requirements and provide such documentation of insurance to the County on an annual basis.
   ☐ Yes ☐ No

3. By signing below, I certify that:
   - I have read the County Insurance Requirements.
   - Agree to all conditions stated in County Insurance Requirements

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SIGNATURE ***(Must be signed by an individual with the legal authority to enter into a contract with the County of Sonoma on behalf of the proposer)***

Signature:_____ Date:_____

Printed Name: _____ Title: _____