

### Vendor Insurance Requirements for Corp Ridge 3

1. Worker's Compensation KS Statutory requirements

Statutory coverage as required by state in which the work is to be performed. If you are self-employed with no other employees, a qualified self-insured, or not required to carry Workers' Compensation, you must submit a letter stating this, or a copy of your certificate of self-insurance. A Waiver of Subrogation endorsement issued in favor of CBRE and Owner must be attached to the certificate

2. Commercial General Liability

\$3,000,000 each occurrence  
\$3,000,000 general aggregate

Any general aggregate shall apply on a "per project" basis for contractors. Coverage is to be provided on an "occurrence" rather than a "claims made" basis.

3. Business Automobile Liability \$1,000,000 each accident  
(any auto/owned/non-owned/hired)
4. Employer's Liability \$1,000,000 each accident
- Professional Liability \$1,000,000 each accident  
(professional design or engineering)

\*Vendors may fulfill their insurance obligations through the use of any combination of primary and umbrella coverage. This coverage shall be primary to Owner's and Manager's insurance and will cover Owner and Manager as Additional Insureds for claims arising out of the Vendor's ongoing and completed operations for or on behalf of Owner or Manager. Owner and Manager shall be named as Additional Insureds by endorsement to Vendor's Commercial General Liability and Auto Liability insurance policies.

**5. ADDITIONAL INSURED ENDORSEMENTS –THIS IS REQUIRED:**

Form "B" CG 20 10 07 04 or equivalent (ongoing operations)  
**AND** CG 20 37 07 04 or equivalent (completed operations).

The terms of your Service Contract require you to name CBRE and Owner (*see #8 for names*) as an **Additional Insured** on the endorsements to your policy (attached to the certificate).

6. Cancellation period must state "30" days

7. Certificate Holder: Griffin Capital Corp  
c/o CBRE, Inc.  
4520 Main Street, Ste 600  
Kansas City, MO 64111
8. Description of Operations/Additional Insured: (all names MUST be listed on COI)

CBRE, Inc / CBRE Real Estate Services Inc. (manager)  
Griffin Capital Essential Asset Property Management, LLC  
Griffin Capital Corporation  
The GC Net Lease (Olathe) Investors, LLC (owner)  
Griffin Capital Essential Asset REIT, Inc.  
Farmers Ins Exchange/CRIII Property

9. Error & Omissions (for Consultants Only) \$1,000,000 annual aggregate

The Architect/Engineer must provide certificates of insurance evidencing the above errors & omissions coverage for a period of two years after final payment for the contract.

10. Pollution Liability (if applicable)  
Hazardous or Toxic substances/materials \$1,000,000

**Your Insurers Affording Coverage must have a rating according to Best's Insurance Key Rating Guide of no less than A- Class VII rating.**

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

**ADDITIONAL INSURED - OWNERS, LESSEES OR  
CONTRACTORS - COMPLETED OPERATIONS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

**SCHEDULE**

<b>Name Of Additional Insured Person(s) Or Organization(s):</b>	<b>Location And Description Of Completed Operations</b>

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

**Section II - Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".



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

**ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

**SCHEDULE**

Name Of Additional Insured Person(s) Or Organization(s):	Location(s) Of Covered Operations
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

**A. Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" 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(s) at the location(s) designated above.

**B.** With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.