**POLICY NUMBER: COMMERCIAL CENERAL LIABILITY**

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

**ADDITIONAL INSURED – DESIGNATED**

**PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

|  |
| --- |
| **Name of Additional Insured Person(s) or Organizations(s)**  |
| City of Newark Department of Health and Community Wellness 110 William StreetNewark, New Jersey 07102 |
| **Information required to complete this Schedule, if not 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 is 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 your acts or omissions or the acts or omissions or

the acts or omissions of those acting on your behalf.

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented

to you