

# SPECIAL EVENT PERMIT

State of California - The Resources Agency  
DEPARTMENT OF PARKS AND RECREATION

**INSTRUCTIONS:** To apply for a Special Event Permit, complete this form and read the Special Event Permit Terms and Conditions attached. Submit an original and 2 copies of completed forms (an original and 3 copies for hazardous events), all with original signatures, any supplemental documents (see No. 4 below), and a check or money order to cover the required filing fee to the District office of the park unit where the event will be held.

APPLICANT/ORGANIZATION <b>League of American Wheelman dba League of American Bicyclists - ACTC</b>		
ADDRESS <b>P.O. Box 6747</b>	CITY/STATE/ZIP CODE <b>San Jose, CA 95150</b>	
CONTACT PERSON <b>Paul Vlasveld <a href="mailto:pvasvel@adobe.com">pvasvel@adobe.com</a></b>	BUSINESS PHONE <b>( )</b>	CELL PHONE <b>( 408 ) 314-4649</b>
PARK UNIT <b>432-Henry W. Coe SP - Park Contact: Jennifer Naber 831-901-6101</b>	LOCATION <b>9000 E. Dunne Ave., Morgan Hill, CA 95037-6549</b>	
SPECIFIC USE <b>Annual Tierra Bella Century Bicycle Tour</b>	DATE(S) <b>May 3, 2025</b>	HOURS <b>9:00am to 2:00pm</b>

1. PURPOSE OF THE EVENT:  
Annual fundraiser for the Almaden Cycle Touring Club (ACTC). The Almaden Cycle Touring Club invites you to celebrate Spring by riding some of the prettiest roads in southern Santa Clara County on our 46th annual Tierra Bella Bicycle Century Ride.

2. PARK AREA/FACILITIES TO BE USED:  
Coe HQ area used as a rest stop for the Tierra Bella 100 mile bicycle loops. Oak tree lawn area and campsites 1, 2, 19, & 20

3. MAXIMUM NUMBER OF PEOPLE EXPECTED TO ATTEND THE EVENT AT ONE TIME AND METHOD FOR LIMITING ATTENDANCE (THE STATE MAY LIMIT THE MAXIMUM ATTENDANCE WITHIN ITS DISCRETION):  
Max of 50 riders present at any given time, each one staying in the area for approximately 15 minutes - anytime between 9am - 2pm. Max participants for Century Ride: 200. Event limited to 1,100 participants

4. PLEASE ANSWER THE FOLLOWING QUESTIONS:

YES	NO	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Does the event involve the sale or use of alcoholic beverages?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Will additional fees be charged for participants (beyond regular facility fees)?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Will items or services be sold at the event?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any other special conditions or requirements? (e.g., accessibility - see page 2)

If you answered yes to any of the above questions or if liability insurance is required (see Special Event Permit Terms and Conditions), please complete and attach a DPR 246A, Special Event Permit Supplement. If none of the above conditions apply, please complete the signature block below.

I have read and accept the Special Event Terms and Conditions attached. I understand that the District Superintendent or authorized representative may terminate without prior notice any special event activity when it is necessary for the safety and enjoyment of the public, for the protection of the resources, or for violation of any rules or regulations of the Department of Parks and Recreation or conditions of this permit. I also understand that any Special Event Permit may be cancelled without notice in the event of disaster or unforeseen emergency.

SIGNATURE	DATE
<b>X</b> <i>DocuSigned by: Paul Vlasveld</i>	<b>X</b> 2/11/2025

<b>FOR DEPARTMENT COMPLETION ONLY</b>		<b>Department of General Services Use Only</b>
TOTAL PERMIT FEES <b>\$760.00</b>	COMMENTS Permit Fee \$100 + Facility Fee \$500 + Campsite Fees \$160 (\$20/day x 4 sites x 2 days - Friday & Saturday)	
REVIEWED AND RECOMMENDED BY <b>Christina Silverberg</b> C. Silverberg	DATE 2/11/2025	
TITLE Diablo Range Special Events Coordinator	BUSINESS PHONE ( 831 ) 636-5560	
ADDRESS 7800 Cienega Road	CITY/STATE/ZIP CODE Hollister, CA 95023	
APPROVED BY <b>Stuart Organo</b> S. Organo	DATE 2/11/2025	
TITLE Supervising Ranger	BUSINESS PHONE ( 831 ) 760-6383	
ADDRESS 7800 Cienega Road	CITY/STATE/ZIP CODE Hollister, CA 95023	
DIRECTOR APPROVAL (for alcoholic beverage sale of more than 4 days only) <b>N/A</b>	DATE	

## SPECIAL EVENT ACCESSIBILITY CHECKLIST

1. If the expected attendance is a thousand or more, have ASL interpreters been hired to be present during programs or activities?
2. If providing additional toilet facilities, such as portable toilets, have additional (20% plus one) accessible toilet facilities been provided?
3. Are wheelchair seating spaces, with companion seating, provided in assembly areas?

**Seating Capacity**

1 - 50  
51 - 300  
301 - 500  
over 500

**Wheelchair Seating Space**

2  
4  
6  
Add 1 per 100

4. Are individual wheelchair seating spaces at least 30" wide and 60" in length?
5. If the seating capacity is more than 300, are the wheelchair seating areas in more than one location?
6. If providing additional parking spaces, has the number of accessible parking spaces been increased?

**Total Number Of  
Parking Spaces**

1 - 25  
26 - 50  
51 - 75  
76 - 100  
101 - 150  
151 - 200  
201 - 300  
301 - 400  
401 - 500  
501 - 1000

**Minimum Number Of Accessible  
Parking Spaces Required**

1 Van Accessible Space  
2 Including One Van Accessible Space  
3 Including One Van Accessible Space  
4 Including One Van Accessible Space  
5 Including One Van Accessible Space  
6 Including One Van Accessible Space  
7 Including One Van Accessible Space  
8 Including One Van Accessible Space  
9 Including One Van Accessible Space  
2%, Including Three Van Accessible Spaces

7. For outdoor events, has an adequate number of shaded seating areas been provided?
8. Are "visiting" exhibits physically accessible?
9. Are stages and their path(s) of travel accessible?
10. Does advertising include a phone number for persons requesting special accommodation?

## **SPECIAL EVENT PERMIT TERMS AND CONDITIONS**

Special Event Permits, when approved, shall be issued subject to the following provisions:

1. All activities and arrangements for advance preparations within the above named unit, shall be at the direction of the District Superintendent or authorized representative.
  2. Rules and regulations of the Department of Parks and Recreation unless specifically exempted or otherwise noted shall be observed by the permittee, employees, agents, or contractors.
  3. The only special activities granted permittee herein are those which are listed in writing on the permit.
  4. No structures or sets may be constructed unless specifically provided for and described in writing, no digging or excavation is permitted, and no shrubbery or trees are to be cut, trimmed or injured. No additions, alterations, modification, or decorations may be affixed to any Department of Parks and Recreation facility without specific written approval of the District Superintendent.
  5. Fires will not be permitted except upon the specific written approval of the District Superintendent and under specific direction.
  6. Vehicles under the authority of the permittee will be parked in areas designated by the District Superintendent.
  7. Permittee will control all traffic and vehicles associated with the event as directed by the District Superintendent.
  8. Permittee will maintain the permitted area in a clean and sanitary condition and will restore the area to the condition in which it was received to the satisfaction of the State.
  9. Permittee will repair or be billed at the discretion of the State any and all damage to the park unit or any State property which was a result of permittee's activities. State will be the sole judge of the extent of damage and the extent of repairs required to remedy the damage. All repairs will be performed to the satisfaction of the State.
  10. The State may require at its discretion, the following special conditions:
    - a) Fire control measures and additional fire fighting equipment to be furnished by permittee as required by the District Superintendent.
    - b) First-aid service to be supplied by permittee, including ambulance service, doctors or nurses.
    - c) Additional police protection and/or traffic control personnel. Policing of the event will be provided by permittee and at own expense.
    - d) Parking arrangements required for permittee's operating personnel.
    - e) Additional sanitary facilities as required by the District Superintendent. Sanitary facilities over and above those furnished by State may be provided by permittee and at own expense.
- The permittee will be charged a fee based on the number of hours and job classification of State personnel required to meet any special condition.
- All special conditions and associated fees will be listed on the permit.
11. Unless otherwise specified on the Special Event Permit, the State agrees to provide the following services, if available or appropriate.
    - a) Maintain public restrooms.
    - b) Provide fresh water.
    - c) Provide electricity.
    - d) Provide garbage cans and remove refuse.
    - e) Clean all areas prior to occupancy by permittee.

12. The interest of permittee created by this agreement may be subject to property taxation. Permittee agrees to pay any possessory interest tax or any other tax levied on such interest and to indemnify the State from any damage or loss arising, by reason of such tax or Revenue Taxation Code Section 107.6.
13. Permittee may be charged a permit fee in addition to normal park fees, based on costs incurred by the State, size and scope of the event, and prevailing fees for commercial facilities in the locality.
14. Depending on circumstances and probability of occurrence, permittee may be charged a damage deposit as determined by the District Superintendent. Costs for damage repair and any fines or penalties for noncompliance with permit conditions will be deducted from this deposit. The District Superintendent shall determine if all or only a portion of the deposit is refundable.
15. The District Superintendent may terminate without prior notice any special event activity when it is necessary for the safety and enjoyment of the public for the protection of resources, or for violation of any rules or regulations of the Department of Parks and Recreation or conditions of this permit. In addition, any Special Event Permit may be cancelled without notice in the event of disaster or unforeseen emergency.
16. It is an express condition of this permit that the State, its officers, agents and employees shall be free from any and all liabilities and claims for damages and/or suit for or by reason of any death of or injury or injuries to any person or persons or damages to property of any kind whatsoever, whether the person or property of permittee, its agents or employees, or third persons, from any cause or causes whatsoever while in or upon said premises or any part thereof during the term of this permit or occasioned by any occupancy or use of said premises or any activity carried on by permittee in connection therewith; and permittee hereby covenants and agrees to indemnify and to save harmless the State, its officers, agents and employees from all liabilities charges, expenses (including counsel fees) and costs on account of or by reason of any such deaths, injury, liabilities, claims, suits, or losses however occurring or damage growing out of same.
17. For events having greater potential hazard or liability to the State than is incurred through typical daily park activities, permittee will be required to provide the District Superintendent with a certificate of insurance with required endorsements as proof of liability insurance coverage. The policy will cover the period of the permit and will be in an amount no less than one of the following as determined by the District Superintendent:

**STATE OF CALIFORNIA INSURANCE REQUIREMENTS:**

- Combined single limit (CSL) \$1,000,000 per occurrence.
- General Aggregate \$2,000,000

**Insurance policies shall be underwritten to the satisfaction of the State and shall contain the following special language on an additional insured endorsement (preferably form CG2012):**

***State of California, its officers, agents, and employees***

The insurer will not cancel or reduce the insured's coverage during the period that this permit is in effect or without 30 days prior written notice, whichever is shorter, to State.

This cancellation provision shall not be construed in derogation of the duty of the permittee to furnish insurance during the entire term of the permit.

18. Contacts relating to the insurance policy and payment of fee and in regard to the permit generally may be made through the District Superintendent.
19. All Special Event Permits must be submitted a minimum of forty-five (45) days prior to the day of the event. All copies of the Special Event Permit must be submitted with original signatures.
20. **There is a non-refundable permit fee of \$100. There is a \$100 fee for Special Event cancellations by permittee between 24 to 48 hours of event start date. Special Events cancelled by permittee within 24 hours of event date will not be refunded.**

# SPECIAL EVENT PERMIT SUPPLEMENT

**INSTRUCTIONS:** Complete the information requested below then submit this form with your DPR 246, Special Event Permit.

1. List of fees and charges to participants attending the event. (This is in addition to regular park facility fees)

Adult Registration (1 adult rider)	Fit & Fun	Challenge	Family Registration (1-2 adults + up to 4 minors)	Fit & Fun	Challenge
Opening Day through February 15	\$65	\$75	Opening Day through February 15	\$130	\$150
February 16 through March 31	\$75	\$85	February 16 through March 31	\$150	\$170
Late Registration April 1 through May 2	\$85	\$95	Late Registration April 1 through May 2	\$170	\$190

Clothing (pre-order): T-Shirt \$20 + shipping, Classic style jersey \$75 + tax & shipping, Peloton style jersey \$85 + tax & shipping

2. Plan and method for collecting special fees.

**Online - Pre-registration only**

3. Estimated gross receipts and net profits to the permittee.

N/A - Fundraiser. A portion of proceeds raised from the event are donated to organizations and causes that promote or help bicycling - be it advocacy, safety, education, awareness, or the bicycling environment.

4. Guaranteed minimum fees and/or percentage of the gross income to be paid to the State as rent.

~~State will receive the Permit Fee along with 10% of Gross Receipts (including all concessions) within 20 days of the event date. If not paid within 20 days from the end of the event the permittee will be assessed a \$200.00 Late Fee. After 21 days an additional 5% will be assessed on the total remaining balance owed to the State. After 45 days any planned or scheduled future events are subject to be denied or cancelled. Please provide a copy of the Special Event Accountability Worksheet with your payment to the State within 20 days of the event.~~

~~X N/A Initial - I have read and understand the statement above.~~

5. Method of garbage collection and disposal.

Park trash receptacles and the club, also, uses their trash receptacles - which they remove their own trash.

6. List of items to be sold during the event.

N/A

7. Method of advertising and promoting the event. Attach sample copy of brochures, flyers, poster, etc. The State reserves the right to review and approve all promotional material to protect the interest of the Department.

Website: [www.tierrabella.org](http://www.tierrabella.org)

8. Detailed description of the program to be presented and the displays and concession booths to be installed. (Prepare attachment if additional space is required.)

Tierra Bella Fun & Fit (29M and 49M) and Tierra Bella Challenge (73M and 100M) are held as two separate events on the same day; but all routes will start and end at Christmas Hill Park in Gilroy. All registered participants will be wearing an event wrist band for SAG services and admission to the rest stops.

Henry Coe State Park HQ is used as a rest stop for the event. The rest stop will have refreshments and snacks for the riders. See attached maps for Fun & Fit and Challenge routes. There will be a rest stop at the Cal Fire Station off Canada Road.

**4 Porta-potties and 1 wash station are brought in for event and placed by campsite #2 at Coe H.Q.**

**Event areas must be trash-free and clean by conclusion of event and that porta potties/wash stations are removed within one week of the event.**

9. List of all the organizations involved whether sponsors, recipients or promotional firms. Commercial sponsors must specifically be listed.

Almaden Cycle Touring Club (ACTC), San Jose Radio Amateur Civil Emergency Service, City of Gilroy, City of San Jose, Good Karma Bikes, Community Cycles of California, Volunteer bicycle technicians

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**FOR DEPARTMENT COMPLETION ONLY**

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SPECIAL CONDITIONS REQUIRED OF THE PERMITTEE BY THE DEPARTMENT OF PARKS AND RECREATION:

Have accessibility issues been addressed?  YES  NO

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EXCEPTIONS TO SERVICES PROVIDED BY THE STATE AS LISTED IN SPECIAL EVENT PERMIT AND CONDITIONS:

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THE ITEMS CHECKED BELOW MUST BE RECEIVED AT THE DISTRICT PRIOR TO THE EVENT UNLESS OTHERWISE STATED.

- \$ 600 Permit Fee
- \$ 160 Campsite Fee
- Proof of liability insurance coverage (Certificate of Insurance) in an amount not less than the following:
  - Combined single limit (CSL) \$500,000 per occurrence (must be received at least 60 days in advance of event)
  - Combined single limit (CSL) \$1,000,000 per occurrence (must be received at least 60 days in advance of event)
  - Public liability \$300,000 each person; \$500,000 each occurrence. Property damage, liability and products damage liability \$200,000.
- Copy of license to sell alcoholic beverages from the California Department of Alcohol and Beverage Control (must be received at least 10 days in advance of event)

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YES  NO WALK THROUGH CONDUCTED WITH PERMITTEE.

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COMMENTS:

## Tierra Bella Fun & Fit

29 miles with 752 feet of climbing

If you have not ridden much over the winter, we recommend this relatively flat route through Gilroy and a big loop out to San Martin. Heading west and loop around bucolic roads near Gilroy. There are lots of new roads and scenery to experience on this shorter route. Follow the yellow arrows.

49 miles with 1,846 feet of climbing

This route starts with a loop out to San Martin. Heading west, ride past both Chesbro Reservoir and stop at the Uvas Reservoir rest stop before returning through Gilroy. Follow the green arrows.

## Tierra Bella Challenge

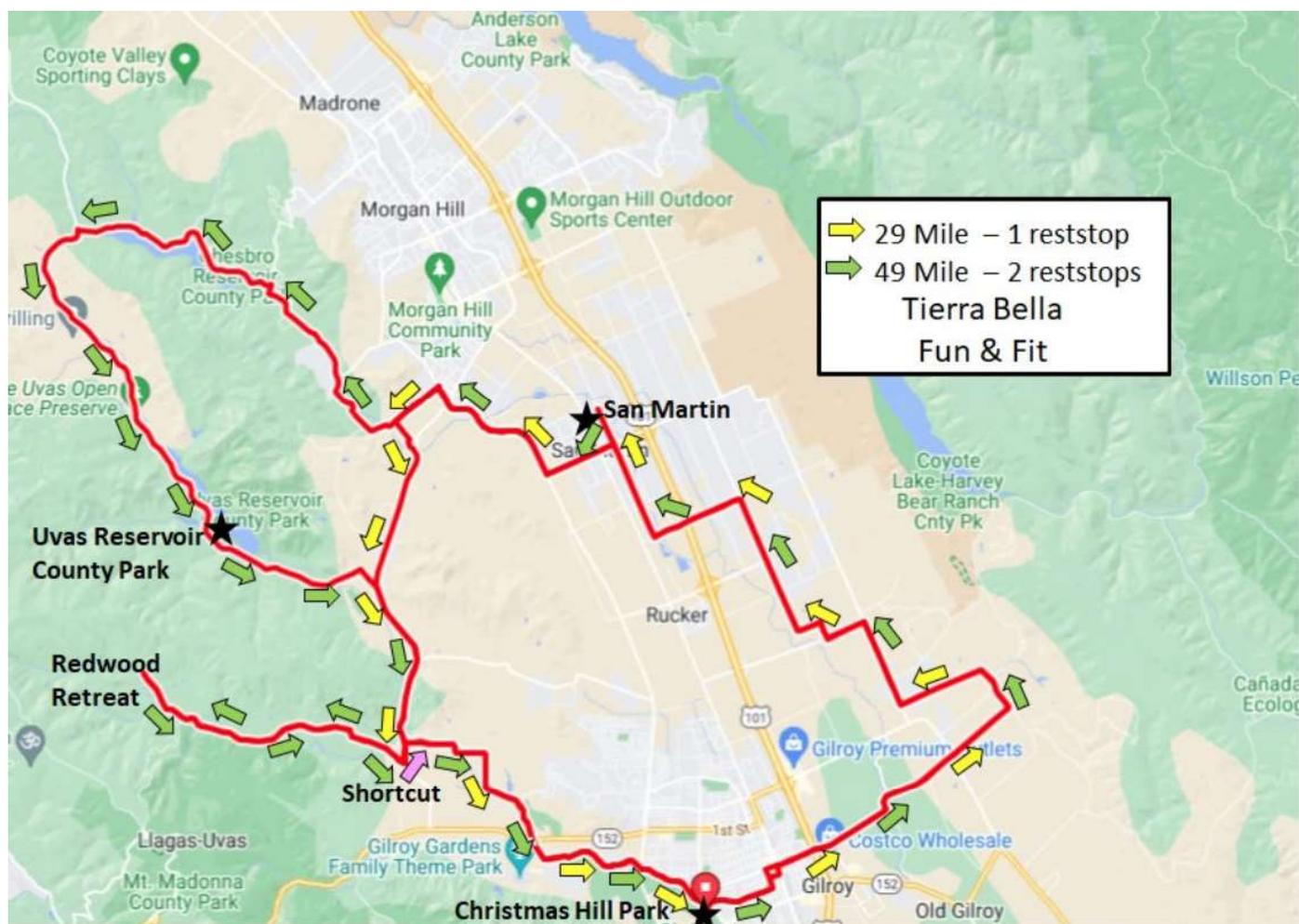
74 miles with 3,707 feet of climbing

This route starts off with the traditional climb up to Gilroy Hot Springs followed by a descent of Canada Rd. Then you head north to San Martin, before continuing into Morgan Hill. Continuing north, you climb up Willow Springs Rd, past Chesbro Reservoir and then turn south, stopping at the Uvas reservoir rest stop before continuing to Redwood Retreat and the finish in Gilroy. Follow the blue arrows.

100 miles with 7,185 feet of climbing

This century ride contains all of the options from the routes. First you climb up to Gilroy Hot Springs and descend Canada Rd. Then you go north past San Martin before starting the challenging climb up to Henry Coe. You next across Morgan Hill and climb up Willow Springs Rd, past Chesbro Reservoir then head south and stop at the Uvas reservoir rest stop before continuing to Redwood Retreat and the finish in Gilroy. Follow the orange arrows.

### May 3, 2025 Tierra Bella Fit & Fun Route (29 Miles and 49 Miles)







# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/06/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> American Specialty Insurance & Risk Services, Inc. dba A.S.I.R.S.I. Insurance Agency (CA License #0E72661) 7609 W. Jefferson Blvd., Suite 100 Fort Wayne IN 46804		<b>CONTACT NAME:</b> <b>PHONE (A/C, No. Ext):</b> _____ <b>FAX (A/C, No):</b> _____ <b>E-MAIL ADDRESS:</b> _____	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> Arch Insurance Company	
		<b>NAIC #</b>	
		11150	
<b>INSURED</b> League of American Wheelmen dba League of American Bicyclists 1612 K Street NW, Suite 1102 Washington DC 20006		<b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

**COVERAGES**

CERTIFICATE NUMBER: 1002320784

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: OTHER	Y		SBCGL0054508	02/01/2025	02/01/2026	EACH OCCURRENCE \$ 1,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000						
							MED EXP (Any one person) \$ Excluded
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 5,000,000
							PRODUCTS - COMP/OP AGG \$ 5,000,000
							\$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED _____ RETENTION \$ _____						EACH OCCURRENCE \$
							AGGREGATE \$
							\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N <input checked="" type="checkbox"/> N/A (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

- Coverage applies to ALMADEN CYCLE TOURING CLUB, P.O. BOX 6747, SAN JOSE, CA 95150.

- The Certificate Holder shall be an Additional Insured, but only with respect to the operations of the Named Insured, and subject to the provisions and limitations of Form CG 2026 Additional Insured - Designated Person or Organization, but only with respect to TIERRA BELLA BICYCLE CENTURY on May 03, 2025.

**CERTIFICATE HOLDER****CANCELLATION**STATE OF CALIFORNIA, ITS OFFICERS, EMPLOYEES AND SERVANTS  
HENRY W. COE STATE PARK

PO Box 787

San Juan Bautista

CA 95045

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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

**ADDITIONAL INSURED**

As of the effective date hereof, it is hereby understood and agreed that the attached Form CG 2026 ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION is added to the policy, but only with respect to ALMADEN CYCLE TOURING CLUB, TIERRA BELLA BICYCLE CENTURY on May 03, 2025.

No additional premium due.

All other terms and conditions of this Policy remain unchanged.

Company: Arch Insurance Company

Endorsement Number:15

Policy Number: SBCGL0054508

Named Insured: League of American Wheelmen dba League of American Bicyclists

Endorsement Effective Date: 05/03/25



President

Issued by: AM February 6, 2025

**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 Organization(s):**

STATE OF CALIFORNIA, ITS OFFICERS, EMPLOYEES AND SERVANTS

HENRY W. COE STATE PARK

PO Box 787

San Juan Bautista, CA 95045

but only with respect to ALMADEN CYCLE TOURING CLUB, TIERRA BELLA BICYCLE CENTURY on May 03, 2025

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 your 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.

However:

- 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- 2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

**B.** With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable limits of insurance;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.