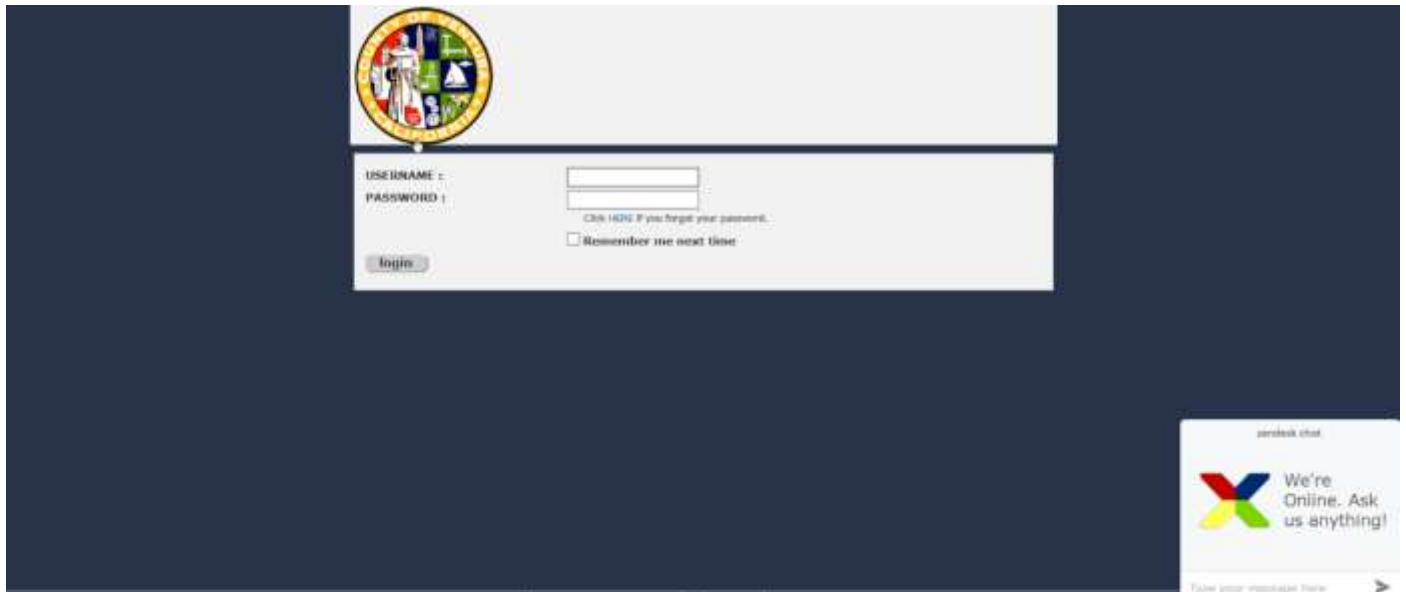




# Vendor Insurance Processing County of Ventura and Exigis

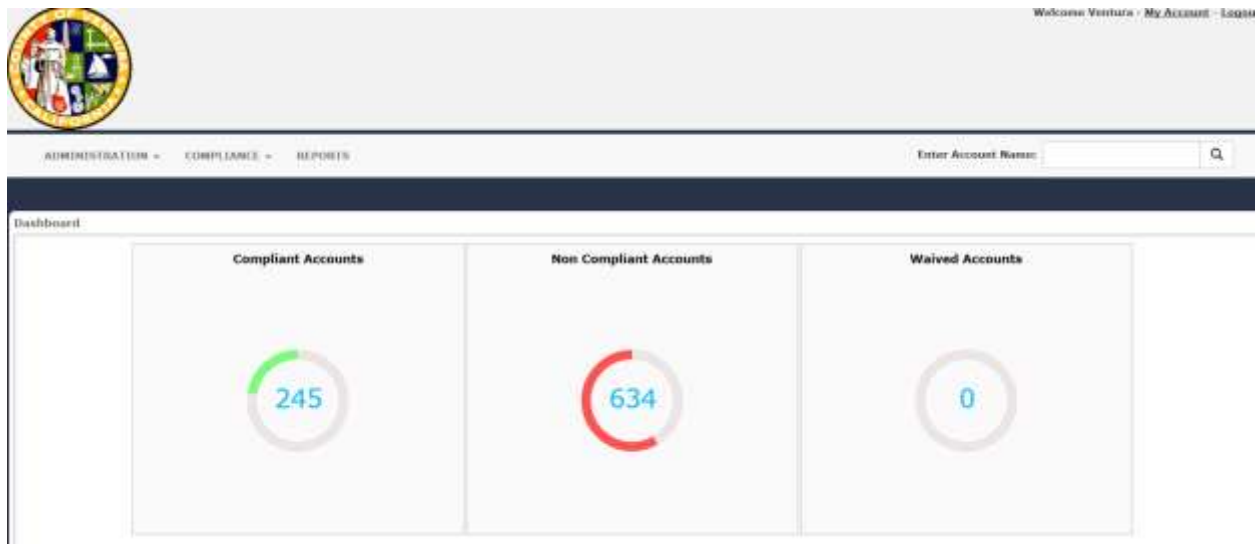


LOGIN: [COVINSURANCE@VENTURA.ORG](mailto:COVINSURANCE@VENTURA.ORG)

PASSWORD: INSURANCE

<https://venturacounty.riskworks.com/>

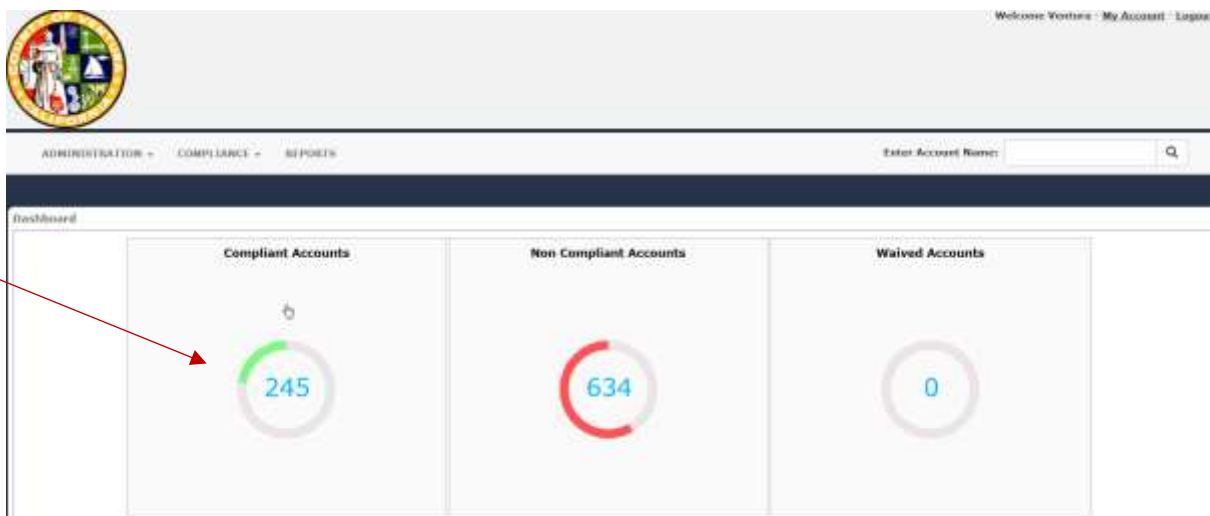
This is the DASHBOARD. This is the main screen. From here you can look at Compliant Accounts, Non Compliant Accounts as well as accounts that have some sort of waiver on file.



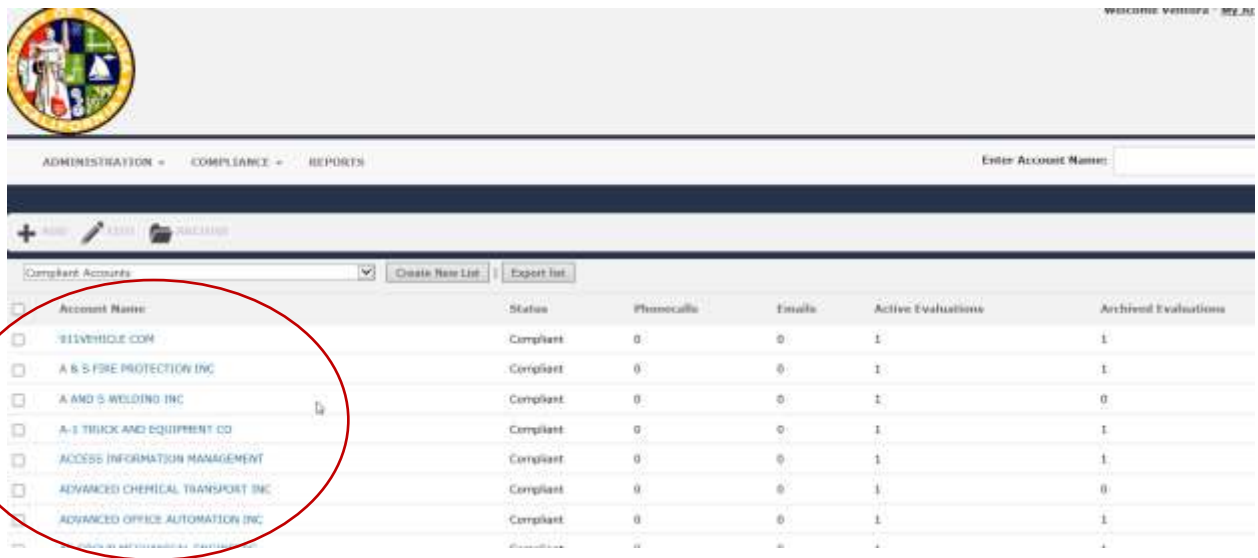
If you ever get 'lost' you can always click on the County of Ventura seal and it will bring you back to the DASHBOARD.



To look at compliant accounts – click on compliant accounts



When you click on compliant accounts you will get an alphabetical listing of all accounts that are compliant with the County of Ventura's insurance requirements.

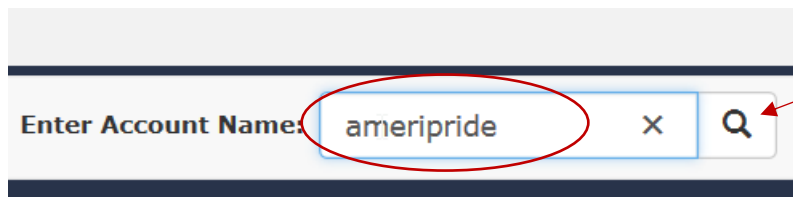


You can scroll through the vendor listing or you can enter the vendors name in the 'Enter Account Name:' field.



Enter the vendors name. In this case, Ameripride.

Click on the magnifying glass or hit 'enter' on your keyboard.



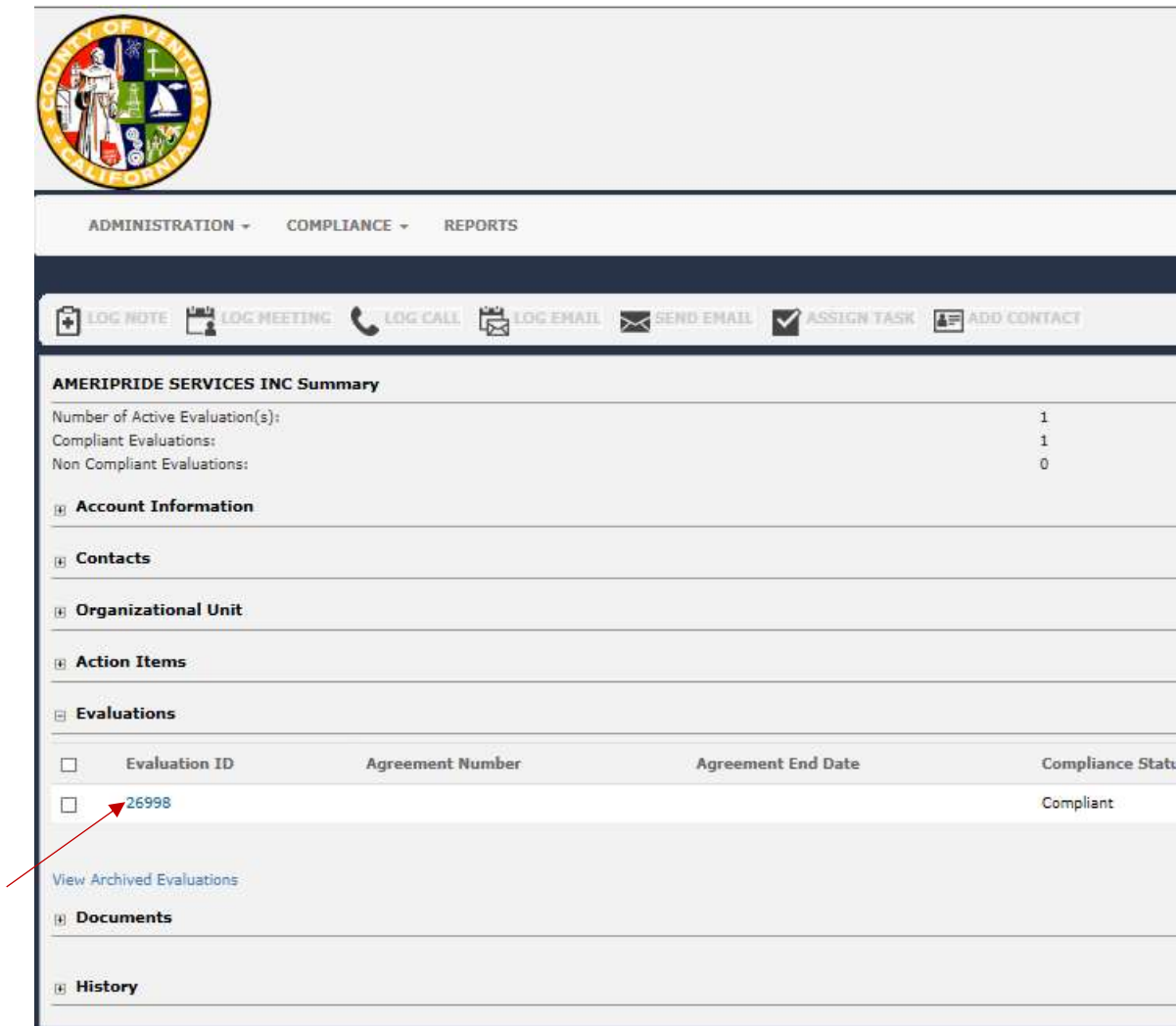
Here is the information on Ameripride. You will notice their status is compliant; there is one active evaluation

| <input type="checkbox"/> | Account Name                            | Status    | Active Evalua |
|--------------------------|---|-----------|---------------|
| <input type="checkbox"/> | <a href="#">AMERIPRIDE SERVICES INC</a> | Compliant | 1             |

To see the information on this vendor, click on their name.



Here is the information on this account. You will notice there is currently only one evaluation for this vendor.



The screenshot shows a web interface for account management. At the top left is a circular logo for the University of Maryland System. Below it are navigation tabs: ADMINISTRATION, COMPLIANCE, and REPORTS. A toolbar contains icons for LOG NOTE, LOG MEETING, LOG CALL, LOG EMAIL, SEND EMAIL, ASSIGN TASK, and ADD CONTACT. The main content area is titled 'AMERIPRIDE SERVICES INC Summary' and contains the following data:

|                                 |   |
|---------------------------------|---|
| Number of Active Evaluation(s): | 1 |
| Compliant Evaluations:          | 1 |
| Non Compliant Evaluations:      | 0 |

Below the summary are expandable sections: Account Information, Contacts, Organizational Unit, Action Items, Evaluations, Documents, and History. The 'Evaluations' section is expanded to show a table:

| <input type="checkbox"/> | Evaluation ID | Agreement Number | Agreement End Date | Compliance Status |
|--------------------------|---------------|------------------|--------------------|-------------------|
| <input type="checkbox"/> | 26998         |                  |                    | Compliant         |

A red arrow points to the '26998' evaluation ID. Below the table is a link for 'View Archived Evaluations'.

If you would like to see their evaluation, click on the evaluation number, in this case 26998.

| <input type="checkbox"/> | Evaluation ID | Agreement Number | Agreement End Date | Compliance Status |
|--------------------------|---------------|------------------|--------------------|-------------------|
| <input type="checkbox"/> | 26998         |                  |                    | Compliant         |

|                          |                       |
|--------------------------|-----------------------|
| <input type="checkbox"/> | Evaluation ID         |
| <input type="checkbox"/> | <a href="#">26998</a> |

This is where the comments and notes on this evaluation will reside. You will notice the indicators are 'green' – this means all is good to go.

### Summary of Evaluation #26998

for Company Account AMERIPRIDE SERVICES INC

The following information provides up-to date compliance information related to this request only.

[Summary](#) | [Details](#) | [Documents](#) | [Tasks](#) | [Renew](#)

Log Note Log Meeting Log Call Send Email  Assign Task

| Requirement                                | Result  | Indicator | Result Date        | Actions              |
|--|---|-----------|--------------------|----------------------|
| Commercial General Liability               | The required document has been filed and meets the minimum requirement. |           | Jan 11 2018 5:32PM | <a href="#">View</a> |
| Automobile Liability                       | The required document has been filed and meets the minimum requirement. |           | Jan 11 2018 5:32PM | <a href="#">View</a> |
| Workers' Compensation/Employer's Liability | The required document has been filed and meets the minimum requirement. |           | Jan 11 2018 5:32PM | <a href="#">View</a> |
| Excess/Umbrella Liability                  | The required document has been filed and meets the minimum requirement. |           | Jan 11 2018 5:32PM | <a href="#">View</a> |

Click on View. This will give you more information on this evaluation.

### Detailed Results for the Commercial General Liability

for Company Account AMERIPRIDE SERVICES INC

The following information provides up-to date compliance information related to this request only.

[Back to Compliance Request](#)

Log Note Log Meeting Log Call Send Email  Assign Task Set Reminder

#### Document Information

Provided by: Mwani Ngemi on 01/11/2018

| Question  | Provided Answer                 |
|---|---------------------------------|
| Policy Number   | 83CSE59503                      |
| Effective Date  | 10/1/2017                       |
| Expiration Date   | 10/1/2018                       |
| Insurer   | Hartford Fire Insurance Company |
| Financial Strength Rating   | A+                              |
| Financial Size Category   | XV                              |
| Per Occurrence Limit  | 1000000                         |
| Aggregate Limit   | 3000000                         |
| Is Additional Insured endorsement [ISO CG 20 10] naming the County of Ventura attached? |                                 |
| What text is in the Description of Operations?  |                                 |
| What text is in the Certificate Holder field?   | County of Ventura               |

View Original Record

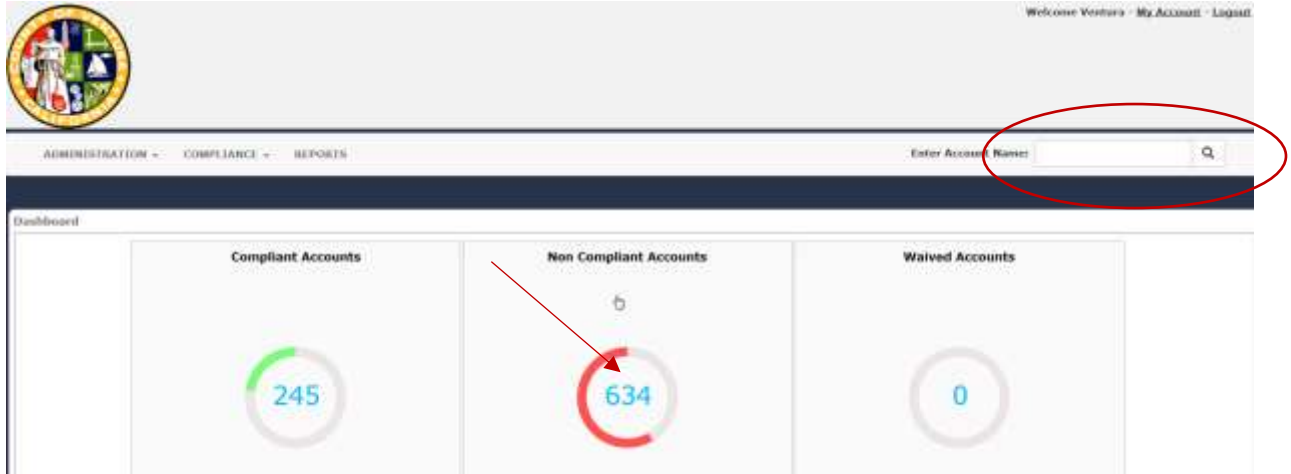
[View original image](#)

#### Results of Document Information

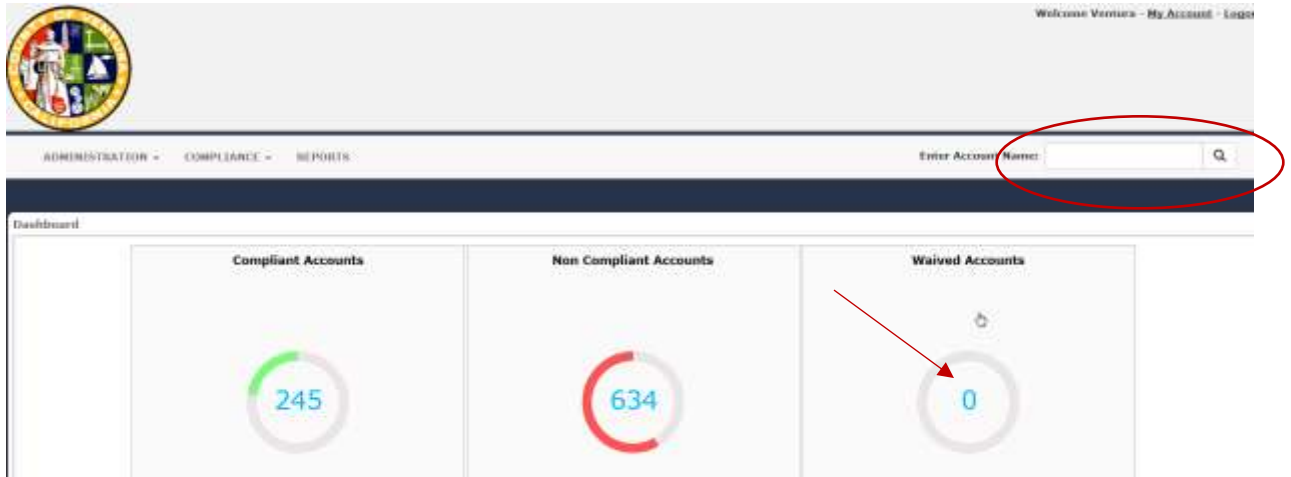
| Indicator | Result                    | Explanation |
|-----------|---------------------------|-------------|
|           | Meets minimum requirement | Compliant   |

You would follow the same steps to look for non compliant accounts and Waived Accounts.

To look at Non Compliant Accounts – click on non-compliant accounts



To look at Waived Accounts – click on waived accounts



You can always type the vendors name in the Enter Account Name field.

To View a Certificate of Insurance.

You can view/reach the uploaded certificates of insurance two ways.

The first way:

Notice on the far right hand side there is a “View Original Record” icon. Click on it.

**Detailed Results for the Commercial General Liability**  
for Company Account AMERIPRIDE SERVICES INC

The following information provides up-to date compliance information related to this request only.

[Back to Compliance Request](#)

Log Note Log Meeting Log Call Send Email Assign Task Set Reminder

**Document Information**  
Provided by: Mwani Ngemi on 01/11/2018

| Question  | Provided Answer                 |
|---|---------------------------------|
| Policy Number   | 83CSE59503                      |
| Effective Date  | 10/1/2017                       |
| Expiration Date   | 10/1/2018                       |
| Insurer   | Hartford Fire Insurance Company |
| Financial Strength Rating   | A+                              |
| Financial Size Category   | XV                              |
| Per Occurrence Limit  | 1000000                         |
| Aggregate Limit   | 3000000                         |
| Is Additional Insured endorsement [ISO CG 20 10] naming the County of Ventura attached? |                                 |
| What text is in the Description of Operations?  |                                 |
| What text is in the Certificate Holder field?   | County of Ventura               |

**Results of Document Information**

| Indicator | Result                    | Explanation |
|-----------|---------------------------|-------------|
| ●         | Meets minimum requirement | Compliant   |

[View Original Record](#)

[View original image](#)

A PDF of the certificate of insurance will appear.

**ACORD®** **CERTIFICATE OF LIABILITY INSURANCE** DATE (MM/DD/YYYY)  
09/28/2017

**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><br>Marsh USA Inc.<br>333 South 7th Street, Suite 1400<br>Minneapolis, MN 55402-2400 | <b>CONTACT NAME:</b><br><b>PHONE (A/C, Ho, Ext):</b><br><b>FAX (A/C, No):</b><br><b>E-MAIL ADDRESS:</b> |
| CN102176371--GAW-17-18      P01   | <b>INSURER(S) AFFORDING COVERAGE</b> <b>NAIC #</b>  |
| <b>INSURED</b><br>AmeriPride Services Inc.<br>10801 Wayzata Blvd.<br>Minnetonka, MN 55305           | <b>INSURER A :</b> Hartford Fire Insurance Company      19682   |
|   | <b>INSURER B :</b> Property & Casualty Insurance Company of Hartford      34690                         |
|   | <b>INSURER C :</b> Twin City Fire Insurance Company      29459  |
|   | <b>INSURER D :</b>  |

You can download, you can save, or just view.



The other way you can locate and view the uploaded certificate of insurance is as follows:

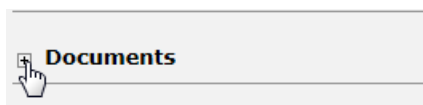
**AMERIPRIDE SERVICES INC Summary**

|                                 |   |
|---------------------------------|---|
| Number of Active Evaluation(s): | 1 |
| Compliant Evaluations:          | 1 |
| Non Compliant Evaluations:      | 0 |

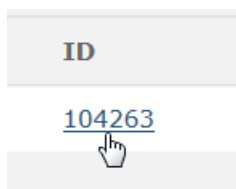
**Documents**

| Evaluation ID | Agreement Number | Agreement End Date | Compliance Status |
|---------------|------------------|--------------------|-------------------|
| 26998         |                  |                    | Compliant         |

Click on Documents:



Click on the id – in this case 104263



The PDF of the certificate of insurance will appear. You can download, save or view.



## CERTIFICATE OF LIABILITY INSURANCE

|                                 |
|---------------------------------|
| DATE (MM/DD/YYYY)<br>09/28/2017 |
|---------------------------------|

**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><br>Marsh USA Inc.<br>333 South 7th Street, Suite 1400<br>Minneapolis, MN 55402-2400<br><br>CN102176371--GAW-17-18                      P01 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>CONTACT NAME:</b></td> </tr> <tr> <td style="width: 70%;"><b>PHONE (A/C, No, Ext):</b></td> <td><b>FAX (A/C, No):</b></td> </tr> <tr> <td colspan="2"><b>E-MAIL ADDRESS:</b></td> </tr> <tr> <td colspan="2" style="text-align: center;"><b>INSURER(S) AFFORDING COVERAGE</b></td> </tr> <tr> <td><b>INSURER A : Hartford Fire Insurance Company</b></td> <td style="text-align: center;"><b>NAIC #</b><br/>19682</td> </tr> <tr> <td><b>INSURER B : Property &amp; Casualty Insurance Company of Hartford</b></td> <td style="text-align: center;">34690</td> </tr> <tr> <td><b>INSURER C : Twin City Fire Insurance Company</b></td> <td style="text-align: center;">29459</td> </tr> <tr> <td><b>INSURER D :</b></td> <td></td> </tr> </table> | <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 : Hartford Fire Insurance Company</b> | <b>NAIC #</b><br>19682 | <b>INSURER B : Property &amp; Casualty Insurance Company of Hartford</b> | 34690 | <b>INSURER C : Twin City Fire Insurance Company</b> | 29459 | <b>INSURER D :</b> |  |
| <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 : Hartford Fire Insurance Company</b>   | <b>NAIC #</b><br>19682   |                      |  |                              |                       |                        |  |                                      |  |  |                        |  |       |   |       |                    |  |
| <b>INSURER B : Property &amp; Casualty Insurance Company of Hartford</b>   | 34690  |                      |  |                              |                       |                        |  |                                      |  |  |                        |  |       |   |       |                    |  |
| <b>INSURER C : Twin City Fire Insurance Company</b>  | 29459  |                      |  |                              |                       |                        |  |                                      |  |  |                        |  |       |   |       |                    |  |
| <b>INSURER D :</b>   |  |                      |  |                              |                       |                        |  |                                      |  |  |                        |  |       |   |       |                    |  |
| <b>INSURED</b><br>AmeriPride Services Inc.<br>10801 Wayzata Blvd.<br>Minnetonka, MN 55305  |  |                      |  |                              |                       |                        |  |                                      |  |  |                        |  |       |   |       |                    |  |