



# CITY OF NEWPORT BEACH

## COMMUNITY DEVELOPMENT DEPARTMENT

100 Civic Center Drive | Newport Beach, CA 92658  
[www.newportbeachca.gov](http://www.newportbeachca.gov) | 949-644-3200

### COMMERCIAL TIDELANDS–POLLUTION LEGAL LIABILITY COVERAGE 2020-2023

The City of Newport Beach’s Commercial Tidelands Program requires permit and lease holders to obtain insurance for pollution legal liability coverage. The City developed a program so that permittees/lessees can take advantage of lower priced group rates and purchase pollution legal liability coverage through the City from Tokio Marine Specialty Insurance Company (Philadelphia).

Please **indicate below your participation** in the City’s Commercial Tidelands Pollution Legal Liability insurance program and **complete the form in its entirety, regardless of whether you would like to participate in the program or not, or are already participating in the program.**

Yes, I would like to participate in the program and I approve the City invoicing me for the cost of the program (to be invoiced monthly, over six months).

No, I would not like to participate in the program. **If checked no, you must forward copies of your current pollution legal liability insurance certificates to [propertyinsurance@newportbeachca.gov](mailto:propertyinsurance@newportbeachca.gov) to ensure your coverage is in compliance with your permit/lease.**

#### 1. Lessee Information

Permit or Leaseholder Name:	
Contact Name:	
Mailing Address:	
City:	
State, Zip:	
Phone:	
E-mail:	

#### 2. Marina Risk Classification

(check the most accurate description and enter the total square footage of your marina)

*Marina – No residential, no fuel or repair*

Square Footage of Marina: \_\_\_\_\_

*Marina – No residential, with fuel and/or repair*

*Marina – Residential, no fuel or repair*

*Restaurant, with slips*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Please contact Lauren Wooding Whitlinger, Real Property Administrator for the City of Newport Beach, with any questions at 949-644-3236 or by e-mail at [lwooding@newportbeachca.gov](mailto:lwooding@newportbeachca.gov).

Mail completed form to: City of Newport Beach, Attn: Lauren Wooding Whitlinger, 100 Civic Center Drive, Newport Beach, CA 92660, or submit via email to [propertyinsurance@newportbeachca.gov](mailto:propertyinsurance@newportbeachca.gov).

Please indicate below where you would like the Additional Insured endorsement to be mailed:

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Please list any other parties you would like listed on the policy as an Additional Insured (i.e. mortgage lender, tenant(s), etc.):

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

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**For City Use Only**

Effective Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Premium Amount: \_\_\_\_\_

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