## **EXHIBIT "B"**

## REQUEST FOR EXEMPTION FROM PROVIDING AUTOMOBILE LIABILITY COVERAGE

Contractor/Consultant by the signature of its authorized representative hereunder represents that all work performed under this contract does not require the Contractor/Consultant, its employees, representatives, or agents, to drive to and from the City of Garden Grove or engage in any driving related to the contractual obligations. However, if, at any time during the performance of the Work contemplated by the Contract Documents, or arising out of the services provided, the Contractor/Consultant, its employees, representatives, or agents should need to drive to and from the City of Garden Grove or engage in any driving to meet the contractual obligations, the Contractor will be responsible for notifying and providing the City/Agency/Sanitary District with evidence satisfactory to the City/Agency/Sanitary District that it has secured automobile liability coverage satisfactory to the City/Agency/Sanitary District, prior to any such Consultant/Contractor, employee, representative or agent, performing any work under the Contract Documents.

California that the foregoing is true, complete, accurate and correct. I also certify that I am authorized to sign this form on behalf of and bind
Company Name
SIGNATURE OF AUTHORIZED PERSON:
PRINTED NAME OF AUTHORIZED PERSON:
TITLE OR POSITION OF AUTHORIZED PERSON:
COMPANY NAME:
DATE:
<b>NOTE</b> : This form shall serve as a request for exemption from providing proof of Automobile Liability Insurance, unless the approval signature from the City of Garden Grove Risk Management Division is present below.
DO NOT FILL OUT THE BOTTOM PORTION OF THIS REQUEST City/Agency/Sanitary District Use Only
☐ Denied
☐ Approved
RISK MANAGEMENT DIVISION SIGNATURE:
DATE:

Revision B: 10/19/2009