

RISK ASSESSMENT OR MODIFICATION OF INSURANCE TERMS

Use this form to request a risk assessment and determine proper insurance requirements when developing a contract. ****Please attach contract and prior Risk Management approval(s) if any****

DATE: 2/10/26

TO: RiskMgmtInsurance@ocgov.com

FROM: Jessica Nguyen

(714) 347-8428

District Attorney

County Employee

Phone #

County Department

CONTRACT TYPE

<input type="checkbox"/> Commodities	<input type="checkbox"/> Public Works	<input checked="" type="checkbox"/> Services
<input type="checkbox"/> Lease/License	<input type="checkbox"/> A & E	<input type="checkbox"/> Other

Vendor Name:

IFB: Yes No Contract or RFP #: MA-026-26010925 Contract Amount: \$46,500/3year

Insurance Type to Reviewed for Waiver or Modification of Terms

<input checked="" type="checkbox"/> Commercial General Liability (CGL)	<input checked="" type="checkbox"/> Workers' Compensation (W/C)	<input type="checkbox"/> Property Insurance
<input checked="" type="checkbox"/> Commercial Auto Liability (AL)	<input checked="" type="checkbox"/> Employer's Liability	<input checked="" type="checkbox"/> Indemnification
<input type="checkbox"/> Professional Liab. (Errors & Omissions)	<input type="checkbox"/> Sexual Misconduct	<input type="checkbox"/> Limitation of Liability
<input type="checkbox"/> Network Security & Privacy Liab.	<input type="checkbox"/> Technology Error & Omissions	<input type="checkbox"/> High Risk
<input type="checkbox"/> Other: _____		

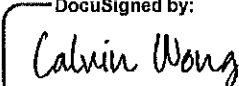
Request and Justification (add another page if necessary):

Use of the shooting range facilities for firearms training purposes - negotiate contract. Requesting to waive CGL primary & non-contributory endorsement, AL & WC/EL insurance since DA will be utilizing Prado's facility. Prado requested to be listed as an additional insured and wants mutual indemnification language added to the Contract. County Counsel has reviewed that and approved it as legal, but it will require Board of Supervisor's approval.

To Be Completed by CEO/Risk Management Approved Denied Approved as Modified**Comments**

Mutual Indemnification and modified insurance where they are requesting that the County be insured is acceptable.

CEO/Risk Management:

DocuSigned by:

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Date: 2/10/2026

Note: CEO Risk Management acts as an advisory to departments regarding risk assessment. Any changes to a contract requires a formal modification.