



Cultural Affairs Division  
Cultural Funding Program  
1 Frank Ogawa Plaza, 9<sup>th</sup> Floor  
Oakland, CA 94612

**NEIGHBORHOOD VOICES FOR FESTIVALS**  
***CFP GRANT CONTRACT CHECKLIST***  
**FY2022-2023**

**Please refer to and use this checklist when completing your agreement packet**

\_\_\_ Grant Agreement w/signature (original or electronic)

\_\_\_ Schedule **A4** (includes Scope of Work and Project Budget)

\_\_\_ Combined Grants Contract Schedule (remember to sign and date)

\_\_\_ Schedule Q (no signature needed, yet please READ and RETURN with contract packet)

\_\_\_ Insurance Documents

\_\_\_ Certificate of Insurance/Acord form: commercial liability, auto, workers' compensation, sexual abuse/molestation. The Certificate Holder should list: *City of Oakland, Cultural Funding Program*  
*1 Frank Ogawa Plaza, 9th Floor, Oakland, CA 94612*

\_\_\_ Endorsement Form identifying Additional Insured, with this language: *"the City of Oakland, it's Councilmembers, directors, officers, agents, employees, and volunteers are additional insured"*

\_\_\_ Waiver of Subrogation if carrying Workers Compensation Insurance

\_\_\_ Request for Insurance modification letter (if necessary) on your letterhead\* (please reach out to Raquel for guidance)

\_\_\_ W-9 Form with legal business name (remember to sign and date)

\_\_\_ Copy of current year Business Tax Certificate (with legal business name and same name as on Resolution)

\* You MUST submit a "request for insurance modification" letter if you are asking for waiver or partial waiver (coverage level) for any of the required forms of insurance.