



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

**ORGANIZATIONAL ASSISTANCE**  
***CFP GRANT CONTRACT CHECKLIST***  
**FY2023-2024**

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

Signed Grant Agreement

Schedule **A5** (includes Scope of Work and Project Budget)

Schedule N & N-1 (if receiving City grants totaling \$25K+)

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\*

2024 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.