**EXHIBIT A**

**Insurance Requirements**

**Commercial General Liability Insurance** - Including Products and Completed Operations with coverage at least equivalent to the latest filed Insurance Services Office, Form CG 00 01 except standard industry exclusions are permitted.

Bodily Injury and Property Damage: $4,000,000 per occurrence

Personal Injury: $2,000,000

The policy shall include an Additional Insured Endorsement including altafiber Network Solutions and subsidiaries as an Additional Insured for liability arising out of this agreement including ongoing operations, products liability and completed operations (If Additional Insured Endorsement CG 20 10 edition 10/01 or later is used, Form CG 20 37 07 04 must be included to extend cover to products liability and completed operations).

This insurance shall be primary and not seek contribution from any other insurance or self-insurance available to altafiber or its affiliates.

**Automobile Liability Insurance (if a bucket truck is used)** - Including owned, leased and non-owned vehicles with coverage at least equivalent to the latest filed Insurance Services Office, Form CA 00 01without endorsements:

Bodily Injury and Property Damage: $1,000,000 per occurrence

This insurance shall be primary and not seek contribution from any other insurance or self-insurance available to altafiber or its affiliates.

**Workers’ Compensation and Employers’ Liability** - Including U.S. Longshoremen’s Harbor Workers’ Act Coverage, IN REM Endorsement, “Jones Act” Endorsement and Outer Continental Shelf Endorsement *where the work to be performed is subject to these provisions:*

Workers’ Compensation - Statutory

Employers’ Liability - $1,000,000 per person (In states where workers compensation is provided by monopolistic insurance funds, Stop Gap Employers Liability must be provided.)

**Umbrella Liability** – This policy shall provide an additional limit over Commercial General Liability Insurance, Auto Liability Insurance and Employers’ Liability with coverage at least as broad as the aforementioned underlying policies, including with respect to any additional insured status.

Limit: $5,000,000

Certificates of Insurance evidencing the insurance required by this Exhibit A should be mailed to:

Altafiber Network Solutions

Risk Management Department, Room 103-770

P.O. Box 2301

Cincinnati, OH 45201