

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/5/2009

PRO	DUCE	ER AGENCY PHONE #		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION				
AG	ENC	CY NAME	ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER, THIS CERTIFICATE DOES NOT AMEND, EXTEND OR					
AD	DRE	ESSS	ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.					
l		, State Zip Code						
	-1,	, 53635 22p 5565		INSURERS AFFORDING COVERAGE			NAIC#	
INSU	RED			INSURER A: a Rated Ins. Company				
Pr	odu	uction Company Name		INSURER B:				
Ado	ire	ess		INSURER C:				
$ _{\mathbf{Ci}}$	tv.	, State, Zip Code	ŀ	INSURER D:			·····	
ı	one	·	ŀ					
			INSURER E:					
THE DOLLDIES OF INCHEANCE LISTED BELOW HAVE BEEN ISSUED TO THE INCHIBED NAMED ABOVE FOR THE DOLLGY REDIOD INDICATED NOTWITHSTANDING								
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OFFICH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.								
INSR LTR	ADD'L	'LI TYPE OF INSURANCE POLICY NUMBER	LICY EFFECTIVE POLICY EXPIRATION LIMITS					
	.,,,,,,	GENERAL LIABILITY				EACH OCCURRENCE \$	1,000,000	
		X COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$	300,000	
A		CLAIMS MADE X OCCUR Policy #	77 /	8/2009	7/8/2010	MED EXP (Any one person) \$	10,000	
, A.		GLAIMS MADE X OCCUR POILEY #	''	8/2009	//8/2010			
						PERSONAL & ADV INJURY \$	1,000,000	
			1			GENERAL AGGREGATE \$	2,000,000	
		GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG \$	2,000,000	
		X POLICY PRO- JECT LOC						
		AUTOMOBILE LIABILITY X ANY AUTO	A PORT OF THE PROPERTY OF			COMBINED SINGLE LIMIT (Ea accident) \$	1,000,000	
A		ALL OWNED AUTOS Policy #	7/	8/2009	7/8/2010	BODILY INJURY \$		
		SCHEDULED AUTOS	_ _		_	(Per person)		
		X HIRED AUTOS X NON-OWNED AUTOS				BODILY INJURY (Per accident) \$		
		I TO THE ACTION				PROPERTY DAMAGE S		
			-V-			(Per accident)		
		GARAGE LIABILITY			2000-00000 Per	LY - EA ACCIDENT \$		
		ANY AUTO				OTHER THAN EA ACC \$ AUTO ONLY: AGG \$		
		EXCESS / UMBRELLA LIABILITY				EACH OCCURRENCE \$		
						AGGREGATE \$		
		OCCUR CLAIMS MADE						
		Macinatoure				S		
		DEDUCTIBLE				\$		
		RETENTION \$				WC STATU- OTH-		
		RKERS COMPENSATION DEMPLOYERS' LIABILITY				TORY LIMITS ER		
	ANY	PROPRIETOR/PARTNER/EXECUTIVE				E.L. EACH ACCIDENT \$		
	(Man	ricer/MEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOYEE \$		
	If yes	s, describe under CIAL PROVISIONS below				E.L. DISEASE - POLICY LIMIT \$		
Α		HERMisc. Owned & Rented Policy #	7/	8/2009	7/8/2010	LIMIT	\$350,000	
		Equipment, Including	'	,	– – – –	DEDUCTIBLE	\$1,000	
		Trailers				RC. SPECIAL FORM		
DESC	RIPTI	TION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED 6 / E	NDORSEMENT	/ SPECIAL PROVI	SIONS	RE, SEELIAH FORM		
		icate holder is included as Additional Insure						
		arising out of the negligence of the Named I	nsured.	Certificate	e holder is n	amed as Loss Payee as	respects	
ren	rented/leased equipment.							
CERTIFICATE HOLDER CANCELLATION								
CEF	HE	TICATE HOLDER	CANCELLATION					
		de la companya de la	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION					
			DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN					
		NAME & ADDRESS		NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL				
	- 1	Vantuas of Sylva		IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR				
		The first fine Shapers Control of the Control of th		REPRESENTATIVES. AUTHORIZED REPRESENTATIVE				
				XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
		0.00000043	© 1000 2000 ACORD CORRORATION. All rights recovered					