

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY) 03/15/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s)

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PRODUCER		CONTACT NAME:				
Aon Risk Services Central, I St. Louis MO Office	nc.	PHONE (A/C. No. Ext):	FAX (A/C. No.): (800) 363-0105			
8182 Maryland Avenue St Louis MO 63105 USA		E-MAIL ADDRESS:				
			INSURER(S) AFFORDING COV	NAIC #		
INSURED		INSURER A:	Liberty Mutual Fire In	s Co	23035	
Keefe Commissary Network, LL	С	INSURER B:	Liberty Insurance Corp	42404		
10880 Linpage Place St. Louis MO 63132 USA		INSURER C:				
		INSURER D:				
		INSURER E:				
		INSURER F:				
COVERAGES	CERTIFICATE NUMBER: 5700657490	11	REVISION	NUMBER:		

THIS IS TO CERTIFY THAT 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 OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

11100	Limits snown are as requested								
INSR LTR		TYPE OF INSURANCE	INSD	SUBR WVD		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	S
Α	Х	COMMERCIAL GENERAL LIABILITY			EB2651291759066		12/01/2017	EACH OCCURRENCE	\$1,000,000
		CLAIMS-MADE X OCCUR			SIR applies per policy ter	ms & condi	tions	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$300,000
		 -						MED EXP (Any one person)	
								PERSONAL & ADV INJURY	\$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$2,000,000
		POLICY PRO- JECT X LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
		OTHER:							
Α	A AUTOMOBILE LIABILITY				AS2-651-291759-076	12/01/2016	12/01/2017	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	X ANY AUTO							BODILY INJURY (Per person)	
	OWNED SCHEDULED							BODILY INJURY (Per accident)	
	ŀ	AUTOS ONLY HIRED AUTOS NON-OWNED AUTOS ONLY AUTOS ONLY						PROPERTY DAMAGE (Per accident)	
	ì	NOTES ONE!							
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	
	D	ED RETENTION							
В		RKERS COMPENSATION AND LOYERS' LIABILITY			wc7651291759046	12/01/2016	12/01/2017	X PER OTH-	
	ANY PROPRIETOR / PARTNER / EXECUTIVE		N/A					E.L. EACH ACCIDENT	\$1,000,000
	(Mandatory in NH)		N/A					E.L. DISEASE-EA EMPLOYEE	\$1,000,000
	If yes	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE-POLICY LIMIT	\$1,000,000
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Lexington-Fayette Urban County Government is included as Additional Insured in accordance with the policy provisions of the general liability and auto liability policies. General liability and auto liability evidenced herein is Primary and Non-Contributory to other insurance available to an Additional Insured, but only in accordance with the policy's provisions. Should any of the above described policies be cancelled before the expiration date thereof, the policy provisions will govern how notice of cancellation may be delivered to certificate holders in accordance with the policy provisions of each policy.

CERTIFICATE HOLDER	CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE Lexington-Favette AUTHORIZED REPRESENTATIVE

Urban County Government
Division of Risk Management
200 East Main Street Lexington KY 40507 USA

Aon Risk Services Central, Inc.