

ACARTER

CERTIFICATE OF LIABILITY INSURANCE

ACORD'

DATE (MM/DD/YYYY) 06/14/2017

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 te	CONTACT te				
Carroll & Stone Insurance		PHONE (A/C, No, Ext): (859) 269-1044	9) 276-0266				
4384 Clearwater Way, Ste. 200 Lexington, KY 40515		E-MAIL ADDRESS:					
		INSURER(S) AFFORDING C	NAIC #				
		INSURER A: Motorists Mutual Insura	14621				
INSURED		INSURER B : Kentucky AGC					
•	C Deer Park Holdings LLC Central	Ky INSURER C:					
Mulch LLC 1499 Maple Street		INSURER D :					
Stanton, KY 40380		INSURER E :					
		INSURER F:					
COVERAGES	CERTIFICATE NUMBER:	REVIS	SION NUMBER:				
THIS IS TO CERTIFY THAT THE	DOLICIES OF INSUIDANCE LISTED DELC	W HV/E BEEN ISSUED TO THE INSUBED NA	MED ABOVE FOR THE	DOLICY DEDIOD			

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.

INSR LTR	TYPE OF INSURANCE	ADDL S	SUBR	POLICY EFF	POLICY EXP (MM/DD/YYYY)	LIMIT	s
A	X COMMERCIAL GENERAL LIABILITY	IIIOD I		(MINIO D) 1 1 1 1 1	(MIND D) 1 1 1 1 1	EACH OCCURRENCE	\$ 1,000,000
	CLAIMS-MADE X OCCUR	Х	3329147300	05/01/2017	05/01/2018	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
						MED EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 2,000,000
	POLICY X PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$ 2,000,000
	OTHER:						\$
Α	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	ANY AUTO	X	3329147300	05/01/2017	05/01/2018	BODILY INJURY (Per person)	\$
	OWNED AUTOS ONLY X SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
	X Hired Car Phys Damag X \$100,000 Limit						\$
Α	X UMBRELLA LIAB X OCCUR					EACH OCCURRENCE	\$ 2,000,000
	EXCESS LIAB CLAIMS-MADE		3329147300	05/01/2017	05/01/2018	AGGREGATE	\$ 2,000,000
	DED RETENTION \$						\$
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					X PER OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE		20548	01/01/2017	01/01/2018	E.L. EACH ACCIDENT	\$ 4,000,000
	(Mandatory in NH)	N/A				E.L. DISEASE - EA EMPLOYEE	
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	
Α	Rented Equipment		3329147300	05/01/2017	05/01/2018	Ded. \$1000	500,000
Α	Pollution Liability		3329147300	05/01/2017	05/01/2018	Each Occurrence	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) For all work performed.

Certificate holder is listed as additional insured.

CERTIFICATE HOLDER	CANCELLATION

LFUCG Room 338, Government Center 200 E. Main St. Lexington, KY 40507 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

1/8/1