AMTEOFK-02

AHODSON



DATE (MM/DD/YYYY) 10/10/2018

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:				
Van Meter Insurance Group Houchens Insurance Group	PHONE (A/C, No, Ext): (859) 263-2771	FAX (A/C, No): (859) 2	63-1999		
505 Wellington Way	E-MAIL ADDRESS:				
Lexington, KY 40503	INSURER(S) AFFORDING COVERAGE	NAIC #			
	INSURER A: The Phoenix Insurance Company				
INSURED	INSURER B : Travelers Property Casualty Company of America 25674				
Amteck Of Kentucky LLC	INSURER C: Ohio Casualty Insurance Compai	24074			
1387 E. New Circle Řd., Suite 130	INSURER D : Great American Alliance Insurance	ce Company	26832		
Lexington, KY 40505	INSURER E :				
	INSURER F:				

COVERAGES CERTIFICATE NUMBER: 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.

	XCLUSIONS AND CONDITIONS OF SUCH F									
INSR LTR		ADDL INSD	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
A	X COMMERCIAL GENERAL LIABILITY	Х			······	,,	EACH OCCURRENCE	\$	1,000,000	
	CLAIMS-MADE X OCCUR		Х	Χ	X	CO9K579477	07/02/2018	07/02/2019	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
							MED EXP (Any one person)	\$	5,000	
							PERSONAL & ADV INJURY	Ф	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	Ф	2,000,000	
	POLICY X PRO-						PRODUCTS - COMP/OP AGG	Ф	2,000,000	
	OTHER:						EBL AGGREGATE	\$	2,000,000	
В	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
	X ANY AUTO		X	8100L74376A	07/02/2018	07/02/2019	BODILY INJURY (Per person)	\$		
	OWNED AUTOS ONLY SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$		
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$		
								\$		
С	UMBRELLA LIAB X OCCUR				07/02/2018 07/	07/02/2019	EACH OCCURRENCE	\$ 15	5,000,000	
	X EXCESS LIAB CLAIMS-MADE			ECO1957982413			AGGREGATE	\$ 15	5,000,000	
	DED RETENTION \$							\$		
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						X PER OTH-ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			WC261987600	07/02/2018	07/02/2019	E.L. EACH ACCIDENT	Ф	1,000,000	
							E.L. DISEASE - EA EMPLOYEE	\$	1,000,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
С	Excess Umbrella			ECO1957982413	07/02/2018	07/02/2019	Each Occurance/Agg	15	5,000,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The certificate holder is additional insured by written contract with respects to the General Liability for ongoing and completed operations, on a primary & non-contributory basis, including a waiver of subrogation and additional insured with respects to the auto liability. 30 days' notice of cancellation applies with respects to the General Liability and auto liability, except for non-payment of premium which is 10 days.
revised/reissued from 9/11/18

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 POLICY PROVISIONS.
Lexington-Fayette Urban County Government Division of Central Purchasing 200 East Main St. RM 338 Lexington, KY 40507	WW M