LABOWO-C01

BGRIDER



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/17/2019

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).

PRODUCER	CONTACT Bradley Grider, ACSRC, CRIS, MLIS					
/an Meter Insurance Group louchens Insurance Group	PHONE (A/C, No, Ext): (270) 529-1418 4277 FAX (A/C, No): (270) 8					
240 Fairway Street Bowling Green, KY 42103	E-MAIL ADDRESS: bgrider@higusa.com					
Bowling Green, KY 42103	INSURER(S) AFFORDING COVERAGE					
	INSURER A: Zurich American Insurance Company					
NSURED	INSURER B: State Auto P & C Ins Co	25127				
LABOR WORKS LEXINGTON, LLC; LABOR	INSURER C: American Zurich Insurance Company	40142				
WORKS-INTERNATIONAL, LLC 199 GEORGETOWN ST	INSURER D:					
Lexington, KY 40508	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.

INSR LTR		TYPE OF INSURANCE	ADDL			POLICY EFF	POLICY EXP		s	
Α	Х	COMMERCIAL GENERAL LIABILITY	III O	,,,,,		(MINIE DE TETET	(MINDO) 1111)	EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR			PRA0092957-04	8/31/2019	8/31/2020	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000
	Х	See Remarks addl inf						MED EXP (Any one person)	\$	10,000
								PERSONAL & ADV INJURY	\$	1,000,000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000
		POLICY X PRO- JECT X LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000
		OTHER:						EMPL BENEFITS A	\$	2,000,000
В	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
		ANY AUTO			BAP 2477930 00	8/31/2019	8/31/2020	BODILY INJURY (Per person)	\$	
	Χ	OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	\$	
		HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
		7.0.00 0.12.							\$	
Α	Х	UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$	9,000,000
		EXCESS LIAB CLAIMS-MADE			UMB6513627-04	8/31/2019 8	8/31/2020	AGGREGATE	\$	
		DED X RETENTION\$ 0						Gen Agg	\$	9,000,000
Α	WOR	KERS COMPENSATION EMPLOYERS' LIABILITY						X PER OTH-		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			WC 3804522-05 IN KY MN NC		7/1/2019 7/1/20	7/1/2020	E.L. EACH ACCIDENT	\$	1,000,000
			N/A					E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
		, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
С	Pro	perty			CPP 5913634-04	8/31/2019	8/31/2020	Property		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)					
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.				
LFUCG Water Quality 200 East Main Street Lexington, KY 40507	authorized representative Chist Valle				
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