

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/27/2016

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 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 Carroll & Stone Insurance 4384 Clearwater Way, Ste. 200 Lexington, KY 40515		CONTACT NAME:					
		PHONE (A/C, No, Ext): (859) 269-1044 FAX (A/C, No): (859)	859) 276-0266				
		E-MAIL ADDRESS:					
		INSURER(S) AFFORDING COVERAGE	NAIC #				
		INSURER A: Motorists Mutual Insurance Company	14621				
INSURED		INSURER B : Kentucky AGC					
	Red River Ranch, LLC, Central KY Mulch, LLC & Deer Park	INSURER C: Westchester Fire Insurance Company					
	Holdings, LLC 1499 Maple Street	INSURER D:					
	Stanton, KY 40380	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	NSR TYPE OF INSURANCE		ADDL	SUBR WVD		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
Α	Х	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR			3329147300	05/01/2016	05/01/2017	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
								MED EXP (Any one person)	\$	5,000
								PERSONAL & ADV INJURY	\$	1,000,000
	GEN	N'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000
	X	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000
		OTHER:							\$	
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
Α		ANY AUTO			3329147300	05/01/2016	05/01/2017	BODILY INJURY (Per person)	\$	
		ALL OWNED X SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
	X	HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
									\$	
	Х	UMBRELLA LIAB X OCCUR				EACH OCCURRENCE	\$	2,000,000		
Α		EXCESS LIAB CLAIMS-MADE			3329147300	05/01/2016	05/01/2017	AGGREGATE	\$	2,000,000
		DED RETENTION \$							\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			N/A 205		01/01/2016	01/01/2017	X PER X OTH-		
В			N/A		20548			E.L. EACH ACCIDENT	\$	4,000,000
								E.L. DISEASE - EA EMPLOYEE	\$	4,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	4,000,000
Α	A Equipment Floater				3329147300	05/01/2016	05/01/2017	Leased & Rented Equi		500,000
С	C Pollution Liability				G27092470	09/01/2015	09/01/2016	Each Occurrence		1,000,000

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

RE: "Haley Pike Compost Pad Replacement-Phase 2". Invitation to BID # 120-2015.

CERTIFICATE HOLDER CANCELLATION

> **Lexington Fayette Urban County Government** Office of the Director of Purchasing 200 East Main St, 3rd Floor 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