

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/01/2024

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).

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PRODUCER		CONTACT NAME:	Amy Winkelman				
K & J Flickinger Insurance Agency		PHONE (A/C. No. Ex	_{t):} (419) 668-4406	FAX (A/C, No); (419) 6	63-4406		
30 East Main Street		E-MAIL ADDRESS: amyf@flickinger-ins.com					
Norwalk OH 44857			INSURER(S) AFFORDING COVERAGE		NAIC#		
		INSURER A	: Auto-Owners Insurance Co.		18988		
INSURED		INSURER B	:				
Invizions, Inc.		INSURER C	:				
Energy 1 LTD		INSURER D	:				
2519 State Rte. 61 S.		INSURER E	:				
Norwalk OH 44857		INSURER F	:				
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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.

	EXCLUSIONS AND CONDITIONS OF SUCH FOLICIES. LIMITS SHOWN WAT HAVE BEEN REDUCED BY FAID CLAIMS.						
INSR LTR	TYPE OF INSURANCE	ADDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
A	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 300,000
	CLAIMS-MADE X OCCUR		05442727	4/01/2024	4/01/2025	MED EXP (Any one person)	\$10,000
						PERSONAL & ADV INJURY	\$1,000,000
						GENERAL AGGREGATE	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG	\$2,000,000
	POLICY X PRO-						\$
	AUTOMOBILE LIABILITY			4/01/2024	4/01/2025	COMBINED SINGLE LIMIT (Ea accident)	_{\$} 1,000,000
Α	X ANY AUTO					BODILY INJURY (Per person)	\$
	ALL OWNED SCHEDULED AUTOS		49-442727-00			BODILY INJURY (Per accident)	\$
	HIRED AUTOS X NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$
						,	\$
	X UMBRELLA LIAB X OCCUR			4/01/2024	4/01/2025	EACH OCCURRENCE	\$ 5,000,000
Α	EXCESS LIAB CLAIMS-MADE		49-442727-01			AGGREGATE	\$ 5,000,000
	DED RETENTION\$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N		05442727	4/01/2024	4/01/2025	X WC STATU- TORY LIMITS OTH- FR	Employer's Liab
A	ANV PROPRIETOR/PARTNER/EXECUTIVE	N/A				E.L. EACH ACCIDENT	\$1,000,000
^	(Mandatory in NH)		05442121			E.L. DISEASE - EA EMPLOYEE	\$1,000,000
\bot	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$1,000,000
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Certificate Holder is an additional insured when required by written contract.

CERTIFICATE HOLDER	CANCELLATION			
Lexington-Fayette Urban County Government 200 East Main Street	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, KY 40507	AUTHORIZED REPRESENTATIVE CRYSTAL SALW>			

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