Client#: 1420738 TODDJOH2

ACORD...

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/23/2020

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 any rights to the certificate holder in lieu of such endorsement(s).

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PRODUCER	CONTACT NAME:				
USI Insurance Services LLC-CL	PHONE (A/C, No, Ext): 5028155200 FAX (A/C, No): E-MAIL ADDRESS: penny.brooks@usi.com				
950 Breckenridge Lane Suite 50					
	INSURER(S) AFFORDING COVERAGE	NAIC #			
Louisville, KY 40207	INSURER A: United Fire & Casualty Company	13021			
Todd Johnson Contracting Inc 497 Dillehay Street Danville, KY 40422	INSURER B: KY Associated General Contractors	A55002			
	INSURER C: Illinois Union Insurance Company	27960			
	INSURER D:				
	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 SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s
Α	X COMMERCIAL GENERAL LIABILITY		60511954	01/01/2020	01/01/2021	EACH OCCURRENCE	\$1,000,000
	CLAIMS-MADE X OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000
	X PD Ded:1,000					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 X LOC					PRODUCTS - COMP/OP AGG	\$2,000,000
	OTHER:						\$
Α	AUTOMOBILE LIABILITY		60511954	01/01/2020	01/01/2021	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	X ANY AUTO					BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS ONLY					BODILY INJURY (Per accident)	\$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
	X Drive Oth Car						\$
Α	X UMBRELLA LIAB X OCCUR		60511954	01/01/2020	01/01/2021	EACH OCCURRENCE	\$9,000,000
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$9,000,000
	DED X RETENTION \$0						\$
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		7040	01/01/2020	01/01/2021	X PER OTH-	
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A				E.L. EACH ACCIDENT	\$4,000,000
	(Mandatory in NH)					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	Lease/Rented Eqpt		60511954	01/01/2020	01/01/2021	\$500,000Lmt/\$0Ded	
С	Contractors Eqpt		60511954	01/01/2020	01/01/2021	As Scheduled/\$1,000Ded	
С	Pollution		PYG46855188002	01/01/2020	01/01/2021	\$1M/\$1M/5,000DED	

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

Jimmie Campbell Drive Over Town Branch Project

Bid #58-2020

LFUCG is listed as additional insured with regard to General Liability as required by written contract with the named insured.

CERTIFICATE HOLDER	CANCELLATION			
LFUCG 200 East Main Street 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			
	Al Mark			

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