

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/20/2012

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

	rms and conditions of the pol cate holder in lieu of such end			ndorse	ment. A sta	tement on th	is certificate does no	t confer	rights to the
PRODUCER				CONTACT Jeni Jackson					
Energy Insurance Agency Inc PO Box 55268					PHONE (A/C, No. Ext): (859) 273-1549 FAX (A/C, No): (859) 2				
					E-MAIL ADDRESS: jjackson@energyinsagency.com				
					INSURER(S) AFFORDING COVERAGE				
Lexin	Lexington KY 40555					INSURER A: Westfield Insurance Company			
INSURED				INSURER B:KY AGC/ AGC SIF					
Marrillia Interests LLC dba Marrillia Design &					INSURER C:				
259 W Short St					INSURER D:				
Ste 3	25			INSURER E :					
Lexington KY 40507				INSURER F :					
COVERAGES CERTIFICATE NUMBER:12-13					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 INSR WVD			LICY NUMBER POL		POLICY EXP (MM/DD/YYYY)	LIMITS		
GEN	GENERAL LIABILITY				2/3/2012	2/3/2013	EACH OCCURRENCE	\$	1,000,000
x	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR		TRA3648869				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000
A							MED EXP (Any one person)	\$	10,000
	Manual Printers	_					PERSONAL & ADV INJURY	s	1,000,000

LIK		INSKIV	WYD FOLICT NUMBER	THINDDITTTT	(MINDORTTT)		_	
	X COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE	\$	1,000,000
A						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000
	CLAIMS-MADE X OCCUR		TRA3648869	2/3/2012	2/3/2013	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
	X POLICY PRO- JECT LOC				1		\$	
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	s	
A	ANY AUTO				1	BODILY INJURY (Per person)	s	
	ALL OWNED SCHEDULED AUTOS		TRA3648869	2/3/2012	2/3/2013	BODILY INJURY (Per accident)	s	
	X HIRED AUTOS X NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$	
						Non-owned	\$	1,000,000
	X UMBRELLA LIAB OCCUR			- A-12		EACH OCCURRENCE	\$	5,000,000
A	EXCESS LIAB CLAIMS-MADE			40 0000		AGGREGATE	\$	5,000,000
Same	DED X RETENTIONS 0		TRA3648869	2/3/2012	2/3/2013		\$	
В	B WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					WC STATU- OTH- TORY LIMITS ER		
					12/31/2012	E.L. EACH ACCIDENT	\$	4,000,000
			18208	1/1/2012		E.L. DISEASE - EA EMPLOYEE	\$	4,000,000
						E.L. DISEASE - POLICY LIMIT	\$	4,000,000
A	A Builders Risk		TRA3648869	2/3/2012	2/3/2013	12,208,000		
			1			A CONTRACTOR OF THE STATE OF TH		
		Land A		1				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Certificate holder is listed as additional insured.

Old Frankfort Pike/Alexandria Drive Rock Wall Project

CERTIFICATE HOLDER	CANCELLATION					
Lexington Fayette Urban County Government	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					
	Jeni Jackson/JENI Sui Jackson					