

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/1/2014

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			CONTACT Michell Craig	
Edward Frank Co., In	c.		PHONE (A/C, No, Ext): (502)589-4444 FAX (A/C, No): (502)4	95-2963
900 Envoy Circle			E-MAIL ADDRESS: mcraig@edwardfrank.com	
			INSURER(S) AFFORDING COVERAGE	NAIC #
Louisville	KY	40299	INSURER A Motorist Mutual Insurance Co	14621
INSURED			INSURER B Associated General Contractors	
McNutt Construction	Co		INSURER C:	
Po Box 431			INSURER D:	
			INSURER E :	
Elizabethtown	KY	42702	INSURER F:	
COVERAGES		CERTIFICATE NUMBER:2014	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		SUBR		POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMIT	s	
	GENERAL LIABILITY			. 02.01	(,22,,	(, 22,)	EACH OCCURRENCE	\$	1,000,000
	X COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
Α	A X CLAIMS-MADE OCCUR			3323512530	1/1/2014	1/1/2015	MED EXP (Any one person)	\$	5,000
							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							\$	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
A	X ANY AUTO						BODILY INJURY (Per person)	\$	
	ALL OWNED SCHEDULED AUTOS		3323512530	3323512530	1/1/2014	1/1/2015	BODILY INJURY (Per accident)	\$	
	X HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
							PIP-Basic	\$	10,000
	X UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$	
Α	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	
	DED RETENTION\$			3323512530	1/1/2014	1/1/2015		\$	
В	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE						X WC STATU- OTH- TORY LIMITS ER		
							E.L. EACH ACCIDENT	\$	4,000,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			622	1/1/2014	12/31/2014	E.L. DISEASE - EA EMPLOYEE	\$	4,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	4,000,000
A	A Inland Marine			3323512530	01/0/2014	01/01/2015	Leased, Rented or Borrowed		
							Equipment		\$50,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Exterior Masonry Repairs

Bldg's 02, 03, 08, 10, 11, and 12

West Hickman WWTP

CERTIFICATE HOLDER

Lexington-Fayette County, Kentucky

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				
	David Cooper/MCRAIG				

CANCELLATION

ACORD 25 (2010/05)