

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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

	rtificate holder in lieu of such endors	semei	nt(s).		CONTA	et .					
ROI	DUCER				NAME:						
nh.c	Underwriters Crown Inc				(A/C, No	Ext) 502-24	14-1343	[A/C, No]:	502-2	44-1411	
The Underwriters Group, Inc. 1/00 Eastpoint Parkway						E-MAIL ADDRESS:					
P.O. Box 23790					INSURER(S) AFFORDING COVERAGE					NAIC#	
Louisville, KY 40223					INSURER A Cincinnati Insurance Company					10677	
INSURED					INSURER B KESA Self Insurance Fund						
J. Edinger & Son Inc.						INSURER C .					
1010 Story Avenue					INSURER D						
Louisville, KY 40206					INSURER E						
·O	/ERAGES CER	TIEIC	ΔTE	NUMBER:	INSURE	N.C.		REVISION NUMBER:			
	IIS IS TO CERTIFY THAT THE POLICIES				VE REE	N ISSUED TO			⊰E POL	ICY PERIOD	
IN CE	DICATED NOTWITHSTANDING ANY RE	QUIR PERT/	EME	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF AN'	Y CONTRACT	OR OTHER I	DOCUMENT WITH RESPECT TO	OT TO	WHICH THIS	
	CLUSIONS AND CONDITIONS OF SUCH				BEENF						
SR	TYPE OF INSURANCE	ADOL INSR	MAD PORK	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
ł	GENERAL LIABILITY			EPP0236407	c	05/15/2014	05/15/2015	EACH OCCURRENCE DAMAGE TO RENTED		10,000	
	X COMMERCIAL GENERAL LIABILITY							PREMISES (Ea occurrence)		200	
	CLAIMS-MADE X OCCUR							MED EXP (Any one person)	\$5,00		
	X Garage Liability							PERSONAL & ADV INJURY		0,000	
	Sympol 21							GENERAL AGGREGATE	5-,00	20,000	
	GEN'L AGGREGATE LIMIT APPLIES PER POLICY PRO- LOC							PRODUCTS - COMP/OP AGG	5,00	00,000	
	AUTOMOBILE LIABILITY			EPP0236407		05/15/2014	0./15/201.	COMBINED SINGLE LIMIT (Ea accident)	e'.00	00,000	
	X ANY AUTO			2110230401		03/13 2014	13,2013	BODILY INJURY (Per person)	5	-,	
	ALLOWNED SCHEDULED							BODILY INJURY (Per accident)	S		
	AUTOS AUTOS NON-OWNED							PROPERTY DAMAGE	5		
	HIRED AUTOS AUTOS							(Per accident)	S		
	X UMBRELLA LIAB X OCCUR			EPP023640/		05/15/2014	05/15/2015	EACH OCCURRENCE		00,000	
	A OCCOR									00,000	
	- L GEARRO WAR							AGGREGATE		20,000	
_	WORKERS COMPENSATION			9065		02/28/2014	02/28/2015	X WC STATU- OTH-	\$		
	AND EMPLOYERS' LIABILITY YIN			2003			1, 20, 2013	TORY LIMITS ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E L EACH ACCIDENT		00,000	
	(Mandatory in NH)							E L DISEASE - EA EMPLOYEE	\$2,00	00,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E L DISEASE - POLICY LIMIT		0,000	
	Garagekeepets			EPP0236407		05/15/2014	35/15/2015	Symbol 30	1,00	0,000	
	Lega. Liabiity										
SC	RIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	tlach /	ACORD 101, Additional Remarks	Schedule	, If more space I	s required)				
		-				•					
20	RTIFICATE HOLDER				CANO	ELLATION					
<u>r</u>	TIFICATE HOLDER				CANU	ELLA HON					
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.						
200 East Main					ACCONDANCE WITH THE POLICY PROVISIONS.						
					AUTHOR	RIZED BEPRESE	ENTATIVE	`			
	ington KY 40507					, ,		1			

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