1,000,000



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/02/12

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 Scott Insurance (Rke) 10 Franklin Road SE Ste. 550 Roanoke, VA 24011 Bruce Wilsie-Roanoke		340-343-0071	PHONE FAX		
			(A/C, No, Ext): (A/C, No): E-MAIL ADDRESS:		
			INSURER(S) AFFORDING COVERAGE		NAIC#
			INSURER A: Travindemnity Co (A+)		25658
INSURED	Davis H. Elliot Co., Inc And Subsidiaries 673 Blue Sky Parkway Lexington, KY 40509		INSURER B : Travelers Prop Cas	s Ins Co (A+)	36161
			INSURER C : Hanover Insurance	Company (A)	22292
			INSURER D:		
			INSURER E :		
			INSURER F :		
COURT ACTO				5 CO 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C	

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. ADDL SUBR TYPE OF INSURANCE POLICY NUMBER LIMITS GENERAL LIABILITY 1,000,000 EACH OCCURRENCE \$ DAMAGE TO RENTED VTC2KCO7280B24A 04/01/12 04/01/13 Α X COMMERCIAL GENERAL LIABILITY 300,000 \$ PREMISES (Ea occurrence) CLAIMS-MADE X OCCUR 10.000 MED EXP (Any one person)

1,000,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG \$ POLICY X PRO-\$ OMBINED SINGLE LIMIT AUTOMOBILE LIABILITY 2,000,000 В Х VTC2JCAP8181B535 04/01/12 04/01/13 BODILY INJURY (Per person) ANY AUTO \$ ALL OWNED AUTOS SCHEDULED Х BODILY INJURY (Per accident) \$ AUTOS NON-OWNED AUTOS PROPERTY DAMAGE (Per accident) Х Х HIRED AUTOS \$ UMBRELLALIAB Х 5,000,000 EACH OCCURRENCE OCCUR \$ В **EXCESS LIAB** VTSMJCUP5787B91A 04/01/12 04/01/13 5,000,000 CLAIMS-MADE AGGREGATE \$ RETENTION \$ DED WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE VTC2HUB146K0712 04/01/12 Α 04/01/13 1,000,000 E.L. EACH ACCIDENT OFFICER/MEMBER EXCLUDED? 1,000,000 (Mandatory in Nil) E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below 1,000,000 E.L. DISEASE - POLICY LIMIT \$ RHR8662170 C Equipment Floater 04/01/12 04/01/13 Lsd/Rntd 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Inductive Loop Vehicle Detection & Installation. The Holder is additional insured as respects general liability for work performed if required by written contract.

RHR8662170

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Installation Risk

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LEXU

Lexington-Fayette Urban County Government 200 East main Street Room 338 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.

Project

AUTHORIZED REPRESENTATIVE

CANCELLATION

04/01/12

Martha Woore

04/01/13

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