

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/22/2014

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 OF PRODUCER, AND THE CERTIFICATE HOLDER.

REPRESENTATIVE OR PRODUCER, AND THE GERTIFICATE 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). CONTACT NAME: PHONE (ATC, No. E) E-MAIL ADDRESS: PRODUCER Reynolds Insurance Agency, Inc. FAX (AC, No): 859-986-4976 859-986-8484 PO Box 505 No. Extl: 631 Chestnut St Berea, KY 40403 ". INSURER(S) AFFORDING COVERAGE NAIC # STATE AUTO INS CO OF OHIO 11017 INSURED Sensabaugh Design & Construction LLC KENTUCKY EMPLOYERS MUTUAL INS 10320 INSURER 8 : 2993 Calico Road INSURER C Berea, KY 40403 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. ADDL SUBR POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) TYPE OF INSURANCE POLICY NUMBER LIMITS INSR WVD 07/13/2014 | 07/13/2015 1,000,000 GENERAL LIABILITY SPP2488756 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (EA OCCURENCE) А 100,000 COMMERCIAL GENERAL LIASILITY CLAIMS-MADE 🗸 OCCUR 5.000 MED EXP (Any one person) 1,000,000 PERSONAL & ADVINJURY 3,000,000 GENERAL AGGREGATE 3,000,000 GENL AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG POLICY PRO-COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY BODILY INJURY (Per person) ANY AUTO ALL OWNED AUTOS SCHEDULED **BODILY INJURY (Per accident)** AUTOS NON-OWNED AUTOS PROPERTY DAMAGE (Per accident) HIRED AUTOS UMBRELLA LIAB EACH OCCURRENCE EXCESS LIAB AGGREGATE CLAIMS-MADE RETENTION S WORKERS COMPENSATION AND EMPLOYERS' LIABILITY 397472 04/04/2014 | 04/04/2015 V NC STATU: В 4,000,00 ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT N/A 4,000,00 (Mandatory in NH) E L. DISGASE - EA EMPLOYEE If yas, describe under DESCRIPTION OF OPERATIONS below 4,000,00 E.L. DISEASE - POLICY LIMIT

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

GENERAL LIABILITY POLICY INCLUDES LIMITED POLLUTION LIABILITY WITH RESPECT TO SUDDEN & ACCIDENTAL DISCHARGE SUBJECT TO THE TERMS AND CONDITIONS OF THE POLICY PER FORM CG0001 VERSION 12/04

REVISED_____

CERTIFICATE HOLDER	CANCELLATION
LFUCG 200 E. 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 POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

© 1988-2010 ACORD CORPORATION. All rights reserved.

ACORD 25 (2010/05)

The ACORD name and logo are registered marks of ACORD





POLICY NUMBER 20184541

Page 1 of 1

Certificate of Liability

This certificate is effective 08/05/2014 and cancels and replaces any certificate bearing the same policy number and name of insured previously issued to you.

INSURED:

LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT 200 E MAIN ST STE 925 LEXINGTON KY 40507-1310 JOHN SENSABAUGH ANGELA D SENSABAUGH 2993 CALICO RD BEREA KY 40403-8833

COVERAGE	COVERAGE LIMIT	
Bodily Injury Liability	\$1,000,000 each person/\$1,000,000 each accident	
Property Damage Liability	\$1,000,000 each accident	

In the event of any change in, or cancellation of said policy, the undersigned Company will endeavor to give 15 days written notice to the party to whom this certificate is issued, but failure to give such notice shall impose no obligation nor liability upon the Company.

VICE PRESIDENT, PRODUCT AND RISK MANAGEMENT