**ELAINAG** 

2,000,000

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/27/2017

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 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 have ADDITIONAL INSURED provisions or 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 su		510011101111 71 010	
PRODUCER	CONTACT NAME:		
Logan Lavelle Hunt of Lexington 121 Prosperous Place Ste 2 Lexington, KY 40509	PHONE (A/C, No, Ext): (859) 255-7282	FAX (A/C, No): (859) 254-0894	
	E-MAIL ADDRESS: companyinquiries@Ilhlex.com		
	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Hartford Fire Insurance		19682
INSURED  Banks Engineering Inc. 1211 Jessamine Station Rd. Nicholasville, KY 40356	INSURER B: Hartford Insurance Co.		11000
	INSURER C : Arch Insurance Group		
	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.			
INCD ADDI CUDD	DOLICY EEE   DOLICY EVD		

TYPE OF INSURANCE INSD WVD POLICY NUMBER (MM/DD/YYYY) (MM/DD/YYYY) LIMITS LTR 1,000,000 Α Χ **COMMERCIAL GENERAL LIABILITY** EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) 100,000 CLAIMS-MADE X OCCUR 08/31/2017 08/31/2018 33SBAUR2377 10,000 MED EXP (Any one person) 1,000,000

GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE 2,000,000 PRO-JECT POLICY PRODUCTS - COMP/OP AGG **EPLI** 100,000 OTHER: COMBINED SINGLE LIMIT (Ea accident) 1,000,000 **AUTOMOBILE LIABILITY** Χ 08/31/2017 08/31/2018 ANY AUTO 33UECZB7612 BODILY INJURY (Per person) OWNED AUTOS ONLY SCHEDULED AUTOS BODILY INJURY (Per accident)
PROPERTY DAMAGE
(Per accident) HIRED AUTOS ONLY NON-OWNED AUTOS ONLY 2,000,000 Χ X **UMBRELLA LIAB** OCCUR **EACH OCCURRENCE** 33SBAUR2377 08/31/2017 08/31/2018 **EXCESS LIAB** CLAIMS-MADE AGGREGATE

10,000 **Prod Com Agg** 2,000,000 DED X RETENTION\$ X PER STATUTE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY 33WECAA4NLB 07/01/2017 07/01/2018 1,000,000 ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT N/A 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under
DESCRIPTION OF OPERATIONS below 1,000,000 E.L. DISEASE - POLICY LIMIT **Errors & Omissions** PAAEP0020300 12/07/2016 12/07/2017 2,000,000 Per Claim

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Project: Professional Engineering Services for Citation Trail

CERTIFICATE HOLDER	CANCELLATION
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE

**LFUCG** 200 E. Main St Lexington, KY 40507 THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

PERSONAL & ADV INJURY

**AUTHORIZED REPRESENTATIVE** 

ACORD 25 (2016/03)

© 1988-2015 ACORD CORPORATION. All rights reserved.