KENISAA-03

CROGERS



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/13/2015

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 floider in fled of Such	endorsement(s).			
PRODUCER		CONTACT NAME:		
Van Meter Insurance Group 181 Prosperous Place		PHONE (A/C, No, Ext): (859) 263-2771	FAX (A/C, No): (859)	
Lexington, KY 40509		E-MAIL ADDRESS:		
		INSURER(S) AFFORDING COVERAGE	NAIC #	
		INSURER A : Selective Insurance Company of	12572	
INSURED		INSURER B: Kentucky Employers' Mutual In	10320	
Ken Isaacs Interiors I	nc.	INSURER C:		
141 Leestown Center	Vay	INSURER D:		
Lexington, KY 40511		INSURER E :		
		INSURER F:		
COVERAGES	CERTIFICATE NUMBER:	REVISION NU	MRFR.	

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	ADDL INSD	SUBR WVD		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
Α	Х	COMMERCIAL GENERAL LIABILITY					,	EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR	X		S1971162	01/15/2015	01/15/2016	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
	X	LTD Poll 100,000						MED EXP (Any one person)	\$	10,000
								PERSONAL & ADV INJURY	\$	1,000,000
	GEN	L'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	3,000,000
		POLICY X PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	3,000,000
		OTHER:						Spray Paint Ded	\$	500
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
		ANY AUTO						BODILY INJURY (Per person)	\$	
		ALL OWNED SCHEDULED AUTOS AUTOS						BODILY INJURY (Per accident)	\$	
		HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
								,	\$	
	Х	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$	5,000,000
Α		EXCESS LIAB CLAIMS-MADE			S1971162	01/15/2015	01/15/2016	AGGREGATE	\$	5,000,000
		DED X RETENTION\$ 0							\$	
		KERS COMPENSATION EMPLOYERS' LIABILITY						X PER OTH- STATUTE ER		
В	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Nandatory in NH)		N/A	378924	378924	01/15/2015	01/15/2016	E.L. EACH ACCIDENT	\$	1,000,000
			N/A					E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	If yes	, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
Α	LEA	SED/RENTED EQUIP			S1971162	01/15/2015	01/15/2016	Max Item \$150,000		300,000

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

LFUCG Bid #8-2015 Flooring Installation LFUCG is listed as additional insured by written contract with respects to the general liability for ongiong and completed operations. This insurance shall be primary & non-contributory by written contract with respects to the general liability. 30 days notice of cancellation applies with respects to the general liability except for non payment of premium, which is 10 days.

CERTIFICATE HOLDER	CANCELLATION				
	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 Fayette Urban County Government 200 E Main Street Lexington, KY 40507	AUTHORIZED REPRESENTATIVE Muhisel Isolable				