

LAURADICKEMANN



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/28/2020

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 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 such endorsement(s).

PRODUCER	CONTACT Laura Dickemann			
NFP Property & Casualty Services, Inc. 8900 Keystone Crossing	PHONE (A/C, No, Ext): (317) 808-7272	FAX (A/C, No):(317) 9	72-7142	
Suite 1200	E-MAIL ADDRESS:			
Indianapolis, IN 46240	INSURER(S) AFFORDING COVERAGE		NAIC #	
	INSURER A: Cincinnati Insurance Company	-	10677	
INSURED	INSURER B: The Cincinnati Casualty Compai	ny :	28665	
Mason Private Locating LLC	INSURER C : Admiral Insurance Company		24856	
1255 E County Road 900 N	INSURER D : Peleus Insurance Company			
Pittsboro, IN 46167	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.

INSR	TYPE OF INSURANCE	ADDL SUE	BR	POLICY EFF	POLICY EXP (MM/DD/YYYY)		
Α	X COMMERCIAL GENERAL LIABILITY	IIIOD III		(MINUS DE TITLE)	(IIIIII B B) T T T T T	EACH OCCURRENCE	\$ 1,000,000
	CLAIMS-MADE X OCCUR		EPP0552236	9/18/2019	9/18/2020	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
						MED EXP (Any one person)	\$ 10,000
						PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 2,000,000
	POLICY X PRO- JECT X LOC					PRODUCTS - COMP/OP AGG	\$ 2,000,000
	OTHER:						\$
Α	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	ANY AUTO		EPP0552236	9/18/2019	9/18/2020	BODILY INJURY (Per person)	\$
	OWNED AUTOS ONLY X SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
							\$
Α	X UMBRELLA LIAB X OCCUR					EACH OCCURRENCE	\$ 3,000,000
	EXCESS LIAB CLAIMS-MADE		EPP0552236	9/18/2019	9/18/2020	AGGREGATE	\$ 3,000,000
	DED X RETENTION \$ 0						\$
В	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE N					X PER OTH- STATUTE ER	
			EWC0561817	12/13/2019	9/18/2020	E.L. EACH ACCIDENT	\$ 1,000,000
	(Mandatory in NH)					E.L. DISEASE - EA EMPLOYEE	
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
С	Professional Liabil		EO00005009001	9/18/2019		EACH CLAIM	1,000,000
D	Excess Prof Liabil		121XS0168444	2/26/2020	9/18/2020	Excess Prof Liabil	1,000,000

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

CERTIFICATE HOLDER	CANCELLATION
Evidence of Coverage	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE
	John os illa #