SAMPLE

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 09/25/2023

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: Example
Elliott Powell Baden and Baker Inc.
An ISU Network Member
1521 SW Salmon Street
Portland OR 97205-1783

CONTACT NAME: Leeann Harmon
PHONE (A/C, No, Ext): (503) 227-1771 FAX (A/C, No): (503) 274-7644
E-MAIL ADDRESS: lharmon@epbb.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Western National Mutual	15377
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURED: [who is using the facility]

COVERAGES CERTIFICATE NUMBER: 2023-24 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 LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	X COMMERCIAL GENERAL LIABILITY			At least this			EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 300,000
A	X Washington Stop Gap	Y		CPP1269773 Amounts	08/15/2023	08/15/2024	MED EXP (Any one person)	$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	$ 1,000,000
	POLICY X PRO-JECT LOC						GENERAL AGGREGATE	$ 2,000,000
							PRODUCTS - COMP/OP AGG	$ 2,000,000
							Errors & Omissions	$ Included
							COMBINED SINGLE LIMIT	$ 1,000,000
							...on)	$
							...dent)	$
								$
								$
								$ 5,000,000
								$ 5,000,000
								$
							...OTH-ER	
								$
							...OYEE	$
							...LIMIT	$

- Commercial General Liability issued on form CG 00 01:
  - $1,000,000 Per occurrence for bodily injury and property damage.
  - $1,000,000 Personal injury
  - $2,000,000 Annual aggregate limit.
  - An endorsement shall be issued on the general liability policy naming Longview School District its directors, officers, representatives, employees and agents as additional insureds.
- Auto Liability is required if services are provided on school grounds.
  - Commercial Auto Liability of at $1,000,000 combined single limit, including hired and non-owned auto.

Attached policy forms CG MO ...

Longview School District as Additionally Insured

CERTIFICATE HOLDER

LONGVIEW SCHOOL DISTRICT
2715 LILAC ST
LONGVIEW, WA 98632

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.

AUTHORIZED REPRESENTATIVE

Leeann Harmon