

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/1/2013

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 holder in lieu of such endorsement(s).								
PRO	DUCER		CONTACT Diane Christy					
Cro	ss Insurance-Portlar	nd		PHONE (A/C, No, Ext): (207)780-1677 FAX (A/C, No): (207)780-6377				
233	31 Congress Street			E-MAIL ADDRESS: dchristy@crossagency.com				
PO	Box 567		INSURER(S) AFFORDING COVERAGE				NAIC #	
Poi	rtland ME	04112	INSURER A: Peerless Insurance Co.					
INSU	RED			INSURER B:				
JTI	Investments, Inc.			INSURER C:				
16	Sled Run Road		INSURER D:					
			INSURER E :					
Noi	th Yarmouth ME	04097		INSURER F:				
CO	/ERAGES	CERTIFICATE	NUMBER:CL13819025	50 REVISION NUMBER:				
IN Ce	IIS IS TO CERTIFY THAT THE POI DICATED. NOTWITHSTANDING AI ERTIFICATE MAY BE ISSUED OR (CLUSIONS AND CONDITIONS OF S	NY REQUIREME MAY PERTAIN,	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF ANY CONTRACTED BY THE POLICIE	T OR OTHER ES DESCRIBE	DOCUMENT WITH RESPE D HEREIN IS SUBJECT 1	ECT TO	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LICY EXP /DD/YYYY) LIMITS		
	GENERAL LIABILITY					EACH OCCURRENCE	\$	1,000,000
A	X COMMERCIAL GENERAL LIABILITY				7/1/2014	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000
	CLAIMS-MADE X OCCUR		вко55549380	7/1/2013		MED EXP (Any one person)	\$	5,000
						PERSONAL & ADV INJURY	\$	1,000,000
						CENEDAL ACCRECATE	•	2.000.000

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	GENERAL LIABILITY					EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000
	X COMMERCIAL GENERAL LIABILITY					PREMISES (Ea occurrence)	\$ 300,000
A	CLAIMS-MADE X OCCUR		BK055549380	7/1/2013	7/1/2014	MED EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	\$ 1,000,000
						GENERAL AGGREGATE	\$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG	\$ 2,000,000
	X POLICY PRO- JECT LOC						\$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO					BODILY INJURY (Per person)	\$
	ALL OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	HIRED AUTOS NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$
							\$
	UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$
	DED RETENTION\$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N					WC STATU- OTH- TORY LIMITS ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?					E.L. EACH ACCIDENT	\$
	(Mandatory in NH)	N/A				E.L. DISEASE - EA EMPLOYEE	\$
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Refer to policy for exclusionary endorsements and special provisions. CANCELLATION CERTIFICATE LIGHTER

CERTIFICATE HOLDER	CANCELLATION				
City of Portland 389 Congress Street	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
Room #315	AUTHORIZED REPRESENTATIVE				
Portland, ME 04101	Diane Christy/AD5 Diane M. Christy				
	Diane Chilbey/ADS				