

CERTIFICATE OF LIABILITY INSURANCE

FUTUR-1 OP ID: JG

DATE (MM/DD/YYYY) 01/03/2017

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 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).

	ficate holder in lieu of such end	•	es may require an endor	sement. A stat	ement on thi	s certificate does not come	rigitis to the		
PRODUCER Varney Agency-Auburn 223 Center St, Auburn, ME 04210 Jessica Doucette				CONTACT Jessica O'Connell					
				PHONE (A/C, No, Ext): 207-786-0417 FAX (A/C, No): 207-					
				AIL RESS:					
bessied bodeette			INSURER(S) AFFORDING COVERAGE						
		INSU	INSURER A: HANOVER INSURANCE COMPANY			22292			
INSURE		Products	INSU	IRER B : MAINE	EMPLOYER	RS MUTUAL	11149		
	Nulmage Awnings 101 Merrow Road	INSU	IRER C :						
	Auburn, ME 04210	INSU	INSURER D:						
			INSU	INSURER E:					
		INSU	INSURER F:						
COVE	RAGES C	ERTIFICATE NUI	MBER:	REVISION NUMBER:					
_	IS TO CERTIFY THAT THE POLIC CATED. NOTWITHSTANDING ANY		-				-		
	TIFICATE MAY BE ISSUED OR MALUSIONS AND CONDITIONS OF SUC					HEREIN IS SUBJECT TO ALL	THE TERMS,		
NSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			

INSR LTR		TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER	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			ZBP9134220	05/01/2016	05/01/2017	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
								MED EXP (Any one person)	\$	10,000
								PERSONAL & ADV INJURY	\$	1,000,000
	GEN	L'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000
	X	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000
		OTHER:							\$	
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
Α	X	ANY AUTO			AWP9123080	05/01/2016	05/01/2017	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 X OCCUR						EACH OCCURRENCE	\$	5,000,000
Α		EXCESS LIAB CLAIMS-MADE			ZDP8800017	05/01/2016	05/01/2017	AGGREGATE	\$	5,000,000
		DED RETENTION \$							\$	
		KERS COMPENSATION EMPLOYERS' LIABILITY						PER X OTH-		
В	ANY	PROPRIETOR/PARTNER/EXECUTIVE	N/A		510 1800738	05/01/2016	05/01/2017	E.L. EACH ACCIDENT	\$	1,000,000
	(Man	datory in NH)	N/A					E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
		, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
			•	•			•			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
City of Portland is named as additional insured with respects to the general
liability portion of certificate as requested by contract.

CERTIFICATE HOLDER	CANCELLATION				
City of Portland Permitting & Insp Departments	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
389 Congress Street Portland, ME 04101	AUTHORIZED REPRESENTATIVE Jessica Doucette				