

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/11/2014

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(les) must be endorsed. If SUBROGATION IS WAIVED, subject to

PRODUCER Clark Insurance 2385 Congress Street Portland, ME 04104						CONTACT Jennifer Ferrante																
						PHONE (A/C, No, Ext): (207) 774-6257 FAX (A/C, No): (20)					774-2994											
						E-MAIL ADDRESS: jferrante@turnerbarker.com																
						INSURER(S) AFFORDING COVERAGE					NAIC#											
						INSURER A: Travelers Casualty Ins Co					19046											
INSURED Benkay Japanese Restaurant G K Food Inc Dba Two India Street Portland, ME 04101						RB:																
						INSURER C:																
						INSURER D:																
						INSURER E:																
						INSURER F:																
CC	VERAGES CER	TIFIC	ATE	NUMBER:				REVISION NUM	BER:													
II C	HIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY RI ERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH I	EQUII PERT POLIC	REMI FAIN, CIES.	ENT, TERM OR CONDITIO THE INSURANCE AFFOR LIMITS SHOWN MAY HAVE	N OF A	NY CONTRA Y THE POLIC REDUCED BY	CT OR OTHER IES DESCRIB PAID CLAIMS.	R DOCUMENT WITH ED HEREIN IS SU	H RESPE	ECT TO	WHICH THIS											
INSF LTR	TYPE OF INSURANCE	ADDL INSD	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMIT	s												
A	X COMMERCIAL GENERAL LIABILITY		****					EACH OCCURRENC	E	\$	1,000,000											
	CLAIMS-MADE X OCCUR			680-5494P866-14-42		03/01/2014	03/01/2015	DAMAGE TO RENTED PREMISES (Ea occurrence)		\$	300,000											
								MED EXP (Any one person)		\$	5,000											
								PERSONAL & ADV IN	NJURY	\$	1,000,000											
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGA	ATE	\$	2,000,000											
	POLICY PRO- LOC							PRODUCTS - COMPA	OP AGG	\$	2,000,000											
	OTHER:									\$												
	AUTOMOBILE LIABILITY							COMBINED SINGLE (Ea accident)	LIMIT	\$												
	ANY AUTO	İ						BODILY INJURY (Per	person)	\$												
	ALL OWNED SCHEDULED AUTOS							BODILY INJURY (Per	accident)	\$												
	HIRED AUTOS NON-OWNED AUTOS	ļ						PROPERTY DAMAGE (Per accident)	E	\$												
										\$												
	UMBRELLA LIAB OCCUR							EACH OCCURRENC	E	\$												
	EXCESS LIAB CLAIMS-MADE	1						AGGREGATE		\$												
	DED RETENTION\$									\$												
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER													
	ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDEN	T	\$												
	(Mandatory in NH)	N/A						E.L. DISEASE - EA EI	MPLOYEE	\$												
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLI	CY LIMIT	\$												
	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL																					
City	of Portland is listed as additional insure	d wil	th re	gards to General Liability v	when re	equired by wr	itten contract															
RE:	Outdoor seating																					
CE	RTIFICATE HOLDER	CANCELLATION																				
City of Portland 386 Congress St Portland, ME 04101						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.																
																Jennifu Ferrante						
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