

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/15/2014

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(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

С	he terms and conditions of the policy ertificate holder in lieu of such endor	seme	nt(s)	·					inei ii	gnis to the	
Anderson-Watkins Insurance 31 Central Street Westbrook ME 04092					CONTACT Terry Maietta						
					PHONE (AIC, No, Ext): (207) 856-5500 FAX (AIC, No): (207) 856-0004						
					E-MAIL ADDRESS: tmaietta@andersonwatkinsinsurance.com						
					INSURER(S) AFFORDING COVERAGE				NAIC#		
						INSURER A : Peerless Insurance					
INSURED				INSURER B :							
Southpaw Sign Studio LLC						RC:					
177 Gray Rd Falmouth			ME 04105-			INSURER D :					
raimoun			ME 04105-			INSURER E :					
					INSURER F :						
				NUMBER:				REVISION NUMBER:			
C	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	EQUIR PERT/	EMEI	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF AN	Y CONTRACT THE POLICIE:	OR OTHER	DOCUMENT WITH RESPE	CT TO	WHICH THIS	
INSR A			NSR WVD POLICY NUMBER		POLICY EFF POLICY EXF		POLICY EXP				
A	GENERAL LIABILITY	X	W VII	BOP8865683			08/15/2015	EACH OCCURRENCE	\$	1,000,000	
9	X COMMERCIAL GENERAL LIABILITY					55/10/2014	03/10/2010	DAMAGE TO RENTED	\$	50,000	
	CLAIMS-MADE X OCCUR							PREMISES (Ea occurrence) - MED EXP (Any one person)	s	5,000	
								PERSONAL & ADV INJURY	s	1,000,000	
								GENERAL AGGREGATE	s	2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMP/OP AGG	s	2,000,000	
	POLICY PRO-							THOSOTO COMMITTOL ACCO	\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	s		
	ANY AUTO							BODILY INJURY (Per person)	\$		
	ALL OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$		
	HIRED AUTOS NON-OWNED AUTOS	1						PROPERTY DAMAGE (Per accident)	\$		
								V. 21.22.22.22.22.22.22.22.22.22.22.22.22.2	\$	resident	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$								s		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							WC STATU- TORY LIMITS FR			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$		
	(Wandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE	\$		
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	S		
	RIPTION OF OPERATIONS / LOCATIONS / VEHICL PTIFICATE HOLDER IS AN ADDITION/							Т		***	
										4	
CERTIFICATE HOLDER						CANCELLATION Al 026996					
	CITY OF PORTLAND 389 CONGRESS ST			ME 04404	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
PORTLAND				ME 04101-	Sheresa L. Maietta						