

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/20/2015

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).

Certificate fiolider in	neu or such endorsement(s).					
PRODUCER		CONTACT Mike Kilbride				
Cross Insurance	e-Portland	PHONE (A/C, No. Ext): (207) 780-1677 FAX (A/C, No): (20)	7) 828-8902			
2331 Congress Street		E-MAIL ADDRESS: mkilbride@crossagency.com				
		INSURER(S) AFFORDING COVERAGE	NAIC#			
Portland	ME 04102	INSURER A Hanover Ins Group				
INSURED		INSURER B Allmerica Financial Benefit	41840			
Brew Corp. dba	Brew Associates	INSURER c Maine Employers Mutual Ins Co.				
dba Gritty Mc	Duff's LA Brewing LLC	INSURER D :				
396 Fore Stree	t	INSURER E :				
Portland	ME 04101	INSURER F:				

COVERAGES

CERTIFICATE NUMBER:CL1471414187

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.

NSR LTR	TYPE OF INSURANCE	NSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S	
	GENERAL LIABILITY					EACH OCCURRENCE	\$	1,000,000
A	X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR		ZBN9218909	7/26/2014	7/26/2015	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
						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)	\$	1,000,000
	X ANY AUTO					BODILY INJURY (Per person)	\$	
	ALL OWNED AUTOS  X HIRED AUTOS  X HIRED AUTOS  X NON-OWNED AUTOS		AWN9217004	7/26/2014	7/26/2015	BODILY INJURY (Per accident)	\$	
						PROPERTY DAMAGE (Per accident)	\$	
						Medical payments	\$	5,000
В	X UMBRELLA LIAB X OCCUR					EACH OCCURRENCE	\$	3,000,000
	DED X RETENTIONS 0		UHN9221107	7/26/2014	7/26/2015	AGGREGATE	\$	3,000,000
							\$	
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					X WC STATU- OTH- TORY LIMITS ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE					E.L. EACH ACCIDENT	\$	500,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A	1810103182	7/26/2014	7/26/2015	E.L. DISEASE - EA EMPLOYEE	\$	500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$	500,000
	DESCRIPTION OF OPERATIONS DEIOW					E.E. DISEASE * FOLICY LIMIT		300

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.

CERTIFICATE HOLDER	CANCELLATION				
City of Portland, Maine	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 St. Portland, ME 04101	AUTHORIZED REPRESENTATIVE				
	Michael Kilbride/BD7 Mal M Jakke				