CERTIFICATE OF LIABILITY INSURANCE

Reviewed for Code Compliance
Inspections Division
Approved with Conditions

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THI CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUI REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBRO the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certifica certificate holder in lieu of such endorsement(s).

Date: 02/24/16

PRODUCER

Ellis Agency Inc
196 York Street
P.O. Box 380
York, Maine 03909

Phone: (207)363-7670
Fax: (207)363-1389

CONTACT NAME: Jonel Thames Leake
PHONE (A/C, No, Ext): (207)363-7670
E-MAIL ADDRESS: jleake@ellisinsuranceagency.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Peerless Insurance Company	24198
INSURER B : The Netherlands Insurance Company	24171
INSURER C : Ohio Security Insurance Company	24082
INSURER D :	
INSURER E :	
INSURER F :	

INSURED

Wbin Inc
126 Daniel St Ste 200
Portsmouth, NH 03801

COVERAGES **CERTIFICATE NUMBER:** 254 **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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	4 COMMERCIAL GENERAL LIABILITY			CBP8986739	5/17/2015	5/17/2016	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE / 4 OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ EXCLUDED
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	POLICY / PRO-JECT / LOC						PRODUCTS - COMP/OP AGG	$ 2,000,000
	OTHER:							$
B	AUTOMOBILE LIABILITY			BA8985939	5/17/2015	5/17/2016	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	4 ANY AUTO						BODILY INJURY (Per person)	$
	ALL OWNED AUTOS / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS / 4 NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
								$
A	4 UMBRELLA LIAB / 4 OCCUR			CU8985739	5/17/2015	5/17/2016	EACH OCCURRENCE	$ 10,000,000
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$ 10,000,000
	DED / 4 RETENTION $ 10,000							$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			XWS56126269	5/17/2015	5/17/2016	PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N	N / A					E.L. EACH ACCIDENT	$ 500,000
	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 500,000
							E.L. DISEASE - POLICY LIMIT	$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

477 Congress St - - Portland - Maine

CERTIFICATE HOLDER

Holder's Nature of Interest : Certificate Holder

City of Portland
389 Congress St
Portland, ME 04101

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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