HBARRINGTON



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/21/2017

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(les) must have ADDITIONAL INSURED provisions or 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).

PRODUCER						CONTACT Regan Cahalan				
Norton Insurance Agency 275 US Route 1 Cumberland Foreside, ME 04110					PHONE FAX (A/C, No, Ext): (A/C, No):					
					E-MAIL ADDRESS:					
						INSURER(S) AFFORDING COVERAGE				
					INSURE			surance Companies	NAIC#	
INSURED						INSURER B : Maine Employers Mutual Ins.				
H M Payson and Co						INSURER B : Maine Employers Mutual Ins. INSURER C :				
PO Box 31						INSURER D:				
	Portland, ME 04112-0031			T					 	
				Г	INSURE					
COVERACES CERTIFICATE NUMBER.						INSURER F:				
COVERAGES CERTIFICATE NUMBER: 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			SUBR WVD			POLICY EFF (MM/DD/YYYY)		LIMITS		
A	X COMMERCIAL GENERAL LIABILITY	11430		:		10000011111	United Chililia	EACH OCCURRENCE \$	1,000,000	
	CLAIMS-MADE X OCCUR	X		35842791		03/31/2017	08/01/2017	DAMAGE TO RENTED PREMISES (Ea occurrence) \$	1,000,000	
		^				55.5 1.7 20 11	00/01/2011	· I	10,000	
					-			MED EXP (Any one person) \$	1,000,000	
								PERSONAL & ADV INJURY \$	2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE \$		
	POLICY PROL							PRODUCTS - COMP/OP AGG \$	2,000,000	
Α	OTHER:	<u> </u>					'	COMBINED SINGLE LIMIT	4 000 000	
~	AUTOMOBILE LIABILITY							(Ea accident) \$	1,000,000	
	ANY AUTO			73546409	03/31/20	03/31/2017	08/01/2017	BODILY INJURY (Per person) \$		
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident) \$		
	X HIRED ONLY X NON-OWNED							PROPERTY DAMAGE (Per accident) \$		
								s		
Α	X UMBRELLA LIAB X OCCUR	1				03/31/2017	08/01/2017	EACH OCCURRENCE \$	5,000,000	
	EXCESS LIAB CLAIMS-MAD	:	79847387					AGGREGATE \$	5,000,000	
	DED X RETENTIONS)						5		
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	1						PER OTH-		
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A		1810071946		12/31/2016	12/31/2017	E.L. EACH ACCIDENT \$	500,000	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE \$	500,000	
									500,000	
	DESCRIPTION OF OPERATIONS DEIDW	ì		,,,,,				E.L. DISEASE - POLICY LIMIT \$		
		1	İ							
	<u> </u>	<u> </u>	!							
DE\$0 Certi	CRIPTION OF OPERATIONS / LOCATIONS / VEHI ificate holder has additional insured si	LES (/ atus d	ACORD on the	101, Additional Remarks Schedule e policies indicated in the co	e, may be olumn	attached if mor	e space is requir	ed) ten contract		
		,,		, penero maroatoa m aro a	01411111	22010 40 104	uncu by vinc	terr contract.		
						-				
CERTIFICATE HOLDER						CANCELLATION				
						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE				
City of Portland					THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
	389 Congress Street Portland, ME 04101									
	· orderie; ma 07101					AUTHORIZED REPRESENTATIVE				
					Jan Catalon					
	1					1000	ァンベ	7		