

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/22/2014

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

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 Claudette Turcotte, CPIW, AAI, AU					
Cross Insurance-Bath					NAME: PHONE (A/C, No. Ext): (207) 443-3336 FAX (A/C, No.): (207) 443-2521 FAMAII						
5 Chandler Drive					E-MAIL ADDRESS; cturcotte@crossagency.com						
PO Box 769					INSURER(S) AFFORDING COVERAGE					NAIC #	
Bath ME 04530					INSURER A Atlantic Casualty Insurance					NAIC#	
INSURED					INSURER B Maine Employers Mutual Ins Co					11149	
John Welliver, DBA: dba LFK					INSURERC: Hudson Specialty Ins Co					11117	
188 A State St					INSURER D:						
					INSURER E :						
Portland ME 04101					INSURER F:						
CO	VERAGES CER	NUMBER:CL1442207									
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 ADDLISUBR						POLICY EFF POLICY EXP					
LIH	GENERAL LIABILITY	INSR	WVD	POLICY NUMBER		(MMDD/YYYY)	(MM/DD/YYYY)		s	1,000,000	
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE DAMAGE TO RENTED		100,000	
7				M118000054-2		12/28/2013	12/28/2014	PREMISES (Ea occurrence)	\$		
A	CLAIMS-MADE OCCUR			M110000054-2		12, 20, 2020	12,20,202	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		-					COMBINED SINGLE LIMIT	\$		
	AUTOMOBILE LIABILITY							(Ea accident)	\$		
	ANY AUTO ALL OWNED SCHEDULED							BODILY INJURY (Per person)	\$		
	AUTOS AUTOS NON-OWNED							BODILY INJURY (Per accident) PROPERTY DAMAGE	\$		
	HIRED AUTOS AUTOS							(Per accident)	\$		
			-						\$		
}	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE	-	ĺ					AGGREGATE	\$		
<u> </u>	DED RETENTION\$							LING AT LT L. LOTTE	\$		
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N		}					WC STATU- OTH- TORY LIMITS ER			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If was describe under		N/A				12/20/2013	12/20/2014	E.L. EACH ACCIDENT	\$	500,000	
				1810098306				E.L. DISEASE - EA EMPLOYEE	\$	500,000	
	DESCRIPTION OF OPERATIONS below	ļ	ļ					E.L. DISEASE - POLICY LIMIT	\$	500,000	
C	Liquor Liability		ĺ	HSLL-16803		12/28/2013	12/28/2014			1,000,000	
-			ł								
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHICLE	CLES	(Attach	ACORD 101, Additional Remarks	Schedu	le, if more space	is required)	. of Doubland in	_1	13-1-3	
Refer to policy for exclusionary endorsements and special provisions. City of Portland is also listed as additional insured with regards to the above noted General Liability coverage.											
		- 45	-	one above neces e	J		ery cover.	ago.			
CEI	CERTIFICATE HOLDER						CANCELLATION				
(20	(207)874-8716					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE					
						THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
City of Portland					AVVOIDANGE WITH HIE POEIOT PROVISIONS.						
389 Congress Street Portland, ME 04101					AUTHORIZED REPRESENTATIVE						
FOLCIANA, ME VAIVI											
			of left to								
						C Turcotte, CPIW, AAI, A Claudette Turcotte					