

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/16/2015

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

	he terms and conditions of the policy, ertificate holder in lieu of such endors				ndorse	ement. A sta	tement on th	is certificate does not c	onfer	rights to the						
PRODUCER Clark Insurance 2385 Congress Street Portland, ME 04104 INSURED Back Bay Bicycle, Inc. 333 Forest Avenue Portland, ME 04101						CONTACT NAME: PHONE (A/C, No, Ext): (207) 774-6257 E-MAIL ADDRESS: info@clarkinsurance.com										
												INSURER A : Peerless Insurance				NAIC # 24198
							S IIISUI AIIC	U		24190						
						INSURER B:										
						RC:										
						INSURER D:										
						Fordalia, ME 04101					INSURE	RE:				
												INSURER F:				
				NUMBER:				REVISION NUMBER:								
IN C	HIS IS TO CERTIFY THAT THE POLICIES NDICATED. NOTWITHSTANDING ANY RESERTIFICATE MAY BE ISSUED OR MAY SELUSIONS AND CONDITIONS OF SUCH F	EQUIF PERT POLIC	REME TAIN, CIES.	ENT, TERM OR CONDITIO THE INSURANCE AFFOR LIMITS SHOWN MAY HAVE	N OF A	ANY CONTRAG Y THE POLIC REDUCED BY	CT OR OTHER IES DESCRIB PAID CLAIMS.	R DOCUMENT WITH RESPE	CT TO	WHICH THIS						
INSR LTR		ADDL :		POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s							
Α	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	х		BOP9052583	0	03/18/2015	03/18/2016	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000						
								MED EXP (Any one person)	\$	5,000						
								PERSONAL & ADV INJURY	\$	1,000,000						
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000						
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	2,000,000						
	OTHER:								\$							
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$							
	ANY AUTO							BODILY INJURY (Per person)	\$							
	ALL OWNED SCHEDULED AUTOS AUTOS							BODILY INJURY (Per accident)	\$							
	HIRED AUTOS AUTOS							PROPERTY DAMAGE (Per accident)	\$							
	AUTOS							(i di doddent)	\$							
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$							
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$							
	DED RETENTION\$								\$							
	WORKERS COMPENSATION							PER OTH- STATUTE ER	<u> </u>							
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$							
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYEE								
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$							
	DESCRIPTION OF OPERATIONS BEIOW							E.E. DIOLAGE - I OLIGI LIWIT	Ψ							
	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL Of Portland Maine is an Additional Insur								f the ir	nsured						
CERTIFICATE HOLDER						CANCELLATION										
City of Portland Maine 389 Congress Street Portland, ME 04101						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											
					Carol Sueider- years a											