## ACORD

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE 6/27/2018

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 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)

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PRODUCER	Contact Name:	Larry Cossio							
Cossio Insurance Agency PO Box 5987	Phone (A/C, No, Ext):	(864) 688-0121	Fax (A/C, No):						
Greenville, SC 29606	E-Mail:	E-Mail: tammy@cossioinsurance.com							
(864) 688-0121		INSURER(S) AFFORDING COVERAGE							
INSURED Athens Bounce House Rentals, LLC 298 Tara Way Athens, GA 30606	INSURER A:	NATIONWIDE MUTUAL	23787						
	INSURER B:	Berkley Life & Health Ins	64890						
	INSURER C:								
	INSURER D:								
	INSURER E:								

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	TYPE OF POLICY	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YY)	POLICY EXP (MM/DD/YY)	LIMITS				
A	X COMMERCIAL GENERAL LIABILITY  CLAIMS MADE X OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER X POLICY PROJECT LOC  OTHER:	INSK	WVD	TBD	6/30/2018	6/30/2019	General Agg (Other than Products-C \$5,000,000 Each Occurrence \$1,000,000 Products and Completed Operations \$1,000,000 Personal and Advertising Injury \$1,000,000 Legal Liability to Participants \$1,000,000 Professional Liability (for Event Plann Damages to Premises Rented to You Participant Accident - Excess Medica Deductible \$10,000 None				
	AUTOMOBILE LIABILITY ANY AUTO						COMBINED SINGLE LIMIT (Ea accident) \$				
	ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per Person) \$				
	HIRED AUTOS NON-OWNED AUTOS						BODILY INJURY (Per accident) \$				
							PROPERTY DAMAGE (Per accident) \$				
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE  DED RETENTION \$	=									
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A					PER STATUTE OTH-ER				
В	Accident Medical			PAI L012010596901	6/30/2018	6/30/2019	Accident Medical Deductible \$100 Benefit Period 52 weeks Benefit Maximum \$500,000 Applies During per Covered Accident Applies To Death & Dismemberment Benefits only				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Party Equipment Rentals Operations located at 298 Tara Way Athens, GA 30606. Verification of Insurance Only											
CERTIFICATE HOLDER: CANCELLATION											
Athens Bounce House Rentals, LLC 298 Tara Way Athens, GA 30606			TH	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
				AU	AUTHORIZED REPRESENTATIVE						