

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
CURRENT DATE

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 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 INSURANCE AGENT/BROKER REP NAME					
INSURANCE AGENT/BROKER NAME				PHONE (A/C, No, Ext); INSURANCE AGENT/BROKER CONTACT # (A/C, No):						
INSURANCE AGENT/BROKER STREET ADDRESS				E-MAIL ADDRESS: INSURANCE AGENT/BROKER EMAIL ADDRESS						
INSURANCE AGENT/BROKER CITY/STATE/ZIP CODE				INSURER(S) AFFORDING COVERAGE					NAIC #	
THE PROOF OF THE STREET AND A S					INSURER A : (Insurance Company A) (AM Best Rated A VIII)				#####	
INSURED VENDOD NAME					INSURER B: (Insurance Company B) (AM Best Rated A VIII)				#####	
VENDOR NAME			INSURER C : (Insurance Company C) (AM Best Rated A VIII)					#####		
VENDOR ADDRESS VENDOR CITY, STATE, ZIP CODE				INSURER D :					nnnnn	
VENDOR CITT, STATE, ZIP CODE				INSURER E :						
				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									ICY PERIOD	
INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS I										
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 ADDL SUBR					POLICY EFF	POLICY EXP				
G	ENERAL LIABILITY	INSR W	/D POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT		1,000,000	
A	COMMERCIAL GENERAL LIABILITY				11		EACH OCCURRENCE DAMAGE TO RENTED	\$		
ľ	CLAIMS-MADE X OCCUR	1		1				\$	1,000,000	
H	CEANUS-WADE X OCCUR		Policy Number		Effective	Turi dalla p	MED EXP (Any one person)	\$	10,000	
H	_		Policy Number		Ellective	Expiration	PERSONAL & ADV INJURY	\$	1,000,000	
	EN'L AGGREGATE LIMIT APPLIES PER:							\$	2,000,000	
	Z PRO-			M				\$	1,000,000	
\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	UTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1 000 000	
B	7							\$	1,000,000	
	ANY AUTO ALL OWNED SCHEDULED		Policy Number	Effoct	Effective	Expiration				
ΙK	AUTOS AUTOS NON-OWNED		Policy Number		Lilective	Expiration	PROPERTY DAMAGE	\$,		
Ιť	HIRED AUTOS AUTOS						(Fer accident)	\$		
-	UMBRELLA LIAB OCCUR			7						
 -								\$		
l ⊢	CEAINIS-IVIADE	1						\$		
- W	DED RETENTION\$ WORKERS COMPENSATION							\$		
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE							TORY LIMITS ER			
0	FFICE/MEMBER EXCLUDED?	N/A	Policy Number		Effective	Expiration		\$		
	Mandatory in NH) yes, describe under	6					E.L. DISEASE - EA EMPLOYEE	1 90		
10000	ESCRIPTION OF OPERATIONS below		Policy Number		⊏#a ativa	F		\$		
20000	IISC. RENTED EQUIPMENT	\vdash			Effective	Expiration	\$5,000,000 Limit		eductible Per Loss	
100	ROPS/SETS/WARDROBE	\vdash	Policy Number	50	Effective	Expiration	\$1,000,000 Limit		eductible Per Loss	
	HIRD PARTY PROPERTY DAMAGE		Policy Number		Effective	Expiration	\$1,000,000 Limit	\$1,500 De	eductible Per Loss	
DESCRI	PTION OF OPERATIONS / LOCATIONS / VEHICL	LES (Attac	ch ACORD 101, Additional Remarks	Schedule,	if more space is	required)				
THE CEPTIEICATE HOLDER IS INCLUDED AS ADDITIONAL INCLIDED WITH DESPECT TO THE CENERAL HARBERT AND ALTO HARBERT AND										
THE CERTIFICATE HOLDER IS INCLUDED AS ADDITIONAL INSURED WITH RESPECT TO THE GENERAL LIABILITY, AUTO LIABILITY, AND UMBRELLA LIABILITY POLICIES AND A LOSS PAYEE UNDER THE PRODUCTION PACKAGE POLICY BUT ONLY WITH RESPECT TO THEIR										
AGRE	EMENT WITH THE NAMED INSUR	RED. W	HERE REQUIRED BY COM	NTRACT	, THESE P	OLICIES AR	E PRIMARY & NON-CO	NTRIBL	JTORY TO	
AGREEMENT WITH THE NAMED INSURED. WHERE REQUIRED BY CONTRACT, THESE POLICIES ARE PRIMARY & NON-CONTRIBUTORY TO ANY INSURANCE CARRIED OR MAINTAINED BY THE ADDITIONAL INSURED.										
CERTIFICATE HOLDER					CANCELLATION					
Cour	ier Car Rental, Inc.	CHO								
1241 Rt 23 South					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN					
Wayne, NJ 07470					ACCORDANCE WITH THE POLICY PROVISIONS.					
vvay	vvayrie, iva 0/4/0									

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MUST BE SIGNED

AUTHORIZED REPRESENTATIVE