

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/10/2020

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).

this cer	tificate does not confer rights	to th	e cer	tificate holder in lieu of s	such en	dorsement(s	policies may	require an endorseme	nt. As	tatement on	
PRODUCER					CONT	CONTACT Robert L Dudly					
StateFarm Robert L Dudley					PHONE (A/C, No, Ext): 540-433-2448 (A/C, No):						
2760 S Main Street					E-MAIL ADDRESS:						
Harrisonburg VA 22801						INSURER(S) AFFORDING COVERAGE NAIC #					
						INSURER A : State Farm Fire and Casualty Company					
INSURED						INSURER B:					
Gregory Stewart					INSURER C:						
116 Monument Ave					INSURI	INSURER D:					
Harrisonburg VA 22801					INSURER E:						
COVERAGES CERTIFICATE NUMBER					INSURER F:						
		CATE	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 EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.											
LTR TYPE OF INSURANCE			ADDL SUBR INSD WVD POLICY NUMBER			POLICY EFF POLICY EXP			IITS		
X co	OMMERCIAL GENERAL LIABILITY					(MINGES), TTTT	(MINUDE) ( T T T T	EACH OCCURRENCE \$ 500,000		000	
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$		
				96-C8-B549-6				MED EXP (Any one person)	\$		
CENIL	ACCRECATE LIMIT ADDITION			90-00-0049-0		01/28/2020	01/28/2021	PERSONAL & ADV INJURY	\$		
	AGGREGATE LIMIT APPLIES PER: DLICY PRO- LOC							GENERAL AGGREGATE	\$ 1,000	0,000	
	DLICY JÉČT LOC THER:							PRODUCTS - COMP/OP AGG	\$		
	IOBILE LIABILITY		-					COMBINED SINGLE LIMIT	\$		
AN	NY AUTO							(Ea accident)	\$		
	NNED SCHEDULED AUTOS							BODILY INJURY (Per person)	\$		
HIF	RED NON-OWNED							BODILY INJURY (Per accident) PROPERTY DAMAGE	\$		
70	TOS ONLY AUTOS ONLY							(Per accident)	\$		
UN	MBRELLA LIAB OCCUR								\$		
EX	CESS LIAB CLAIMS-MADE							EACH OCCURRENCE	\$		
DE								AGGREGATE	\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH-	\$			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?											
(Mandatory in NH)									\$		
DESCRIP	PTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT			
								E.L. DISEASE - POLICY LIMIT	\$		
FACRITATION										I	
Inh Discrint	OF OPERATIONS / LOCATIONS / VEHICL	.ES (A	CORD	101, Additional Remarks Schedul	le, may be	attached if more	space is require	ed)			
Job Discription - Artist											
Eight sites f	fall 2020										
Roelun lazz	Z Footival Adipates Farmers 14		٥.								
District Brev	verv. Columbia Pike Fall Festival	rket,	Clare	ndon Day, Clarendon BLV	D and \	Wilson BLVD	between Was	shington and Highland , V	alley Fe	st at New	
Roslyn Jazz Festival , Arlington Farmers Market, Clarendon Day, Clarendon BLVD and Wilson BLVD between Washington and Highland , Valley Fest at New District Brewery, Columbia Pike Fall Festival, Wakefield High school, Farlington Farmers Market											
ERTIFICA	TE HOLDER										
CERTIFICATE HOLDER CA						CANCELLATION					
					SHOL	SHOULD ANY OF THE ADOVE DECORRES					
					INE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
Contract No. 20-744-EP					ACCC						
The county Board of Arlington County , Virginia and its Officers ,					AUTHOR	WITHOUTED DEDDESCRIPT THE A					
Employees and Agents					( 0	AUTHORIZED REPRESENTATIVE					
della Delaley											

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