

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/22/2023

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).										
					NAME:					
NorthEast Insurance Services					(A/C, N	(A/C, No, Ext): (732) 972-1771 (A/C, No): (732) 577-1578				
4400 Route 9 South ADDRESS: FSchiliro@northeastins.com										
Suite 3300						INSURER(S) AFFORDING COVERAGE NAIC #				
Freehold NJ 07728					INSURERA: Great American E&S Insurance Company					
					INSURER B Allmerica Financial Benefit Ins				41840	
Chenosa Systems, Inc. d/b/a Prophoenix Corporation					INSURER C: Certain Underwriter's at Lloyds of Lonc					
502 Pleasant Valley Avenue					INSURER D: Rated by Multiple Companies				00914	
					INSURERE: Arch Specialty Insurance Company					
<u> </u>	prestown NJ 080	INSURER F: Houston Specialty Insuran			ty Insurance Company					
COVERAGES CERTIFICATE NUMBER: CL2383014528										
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 INSURANCE	INSD	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE \$	1,000,000	
A	CLAIMS-MADE X OCCUR	ĺ						DAMAGE TO RENTED PREMISES (Ea occurrence) \$	500,000	
ľ				PL E866842-01		7/21/2023	7/21/2024	MED EXP (Any one person) \$	20,000	
								PERSONAL & ADV INJURY \$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE \$	2,000,000	
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG \$	2,000,000	
	OTHER:							\$		
B								COMBINED SINGLE LIMIT \$	2,000,000	
	ANY AUTO ALL OWNED X SCHEDULED AUTOS X SCHEDULED					3/3/2023	3/3/2024	BODILY INJURY (Per person) \$		
				AWYA569647				BODILY INJURY (Per accident) \$		
	X HIRED AUTOS X NON-OWNED AUTOS							PROPERTY DAMAGE \$		
								PIP-Basic \$		
c	UMBRELLA LIAB X OCCUR							EACH OCCURRENCE \$	2,000,000	
	X EXCESS LIAB CLAIMS-MADE							AGGREGATE \$	2,000,000	
	DED X RETENTION \$ Nil			XS1152123		7/21/2023	7/21/2024	\$		
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N							X PER OTH- STATUTE ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT \$	1,000,000	
	(Mandatory in NH)		Y	Y 13WECKN0728		6/1/2023	6/1/2024	E.L. DISEASE - EA EMPLOYEE \$	1,000,000	
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT \$	1,000,000	
Е	Cyber Liability			C-4MBQ-171675CYBER-20230	2	7/21/2023	7/21/2024	Limit 5	mil./5 mil.	
F	Professional Liability			TEC-HS-0000030-00		09/02/2023	09/02/2024	Limit 3	mil./3 mil.	
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) When required by written agreement: Okaloosa County BCC and their resepctive officials, employees, & volunteers of each and all other interests as may be reasonably required by Okaloosa County are included as Additional Insured on a Primary and Non-Contributory Basis. 30 Day Notice of Cancellation to the Certificate Holder except for Non-Pmt. which is 10 Days										
CONTRACT: C23-3891-PW										
							_ PRO-PHOENIX OF FLORIDA			
CEF	CERTIFICATE HOLDER CAN									
						EXPIRES:UNTIL INSTALLATION IS COMPLETE				
	Okaloosa County BCC					SH:				
5479-A Old Bethel Road					ACC					
	Crestview, FL 32536									
						AUTHORIZED REPRESENTATIVE				
									,	
Frank Schiliro/FR503 Frank Schiliro										
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