

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/6/2022

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)

	e terms and conditions of the policy, certain polici ertificate holder in lieu of such endorsement(s).	es may require an em	uvise	ment. A Star	ement on th	is certificate does not co	nner II	Aurz in ius	
PRODUCER Florida Sheriffs Risk Management Fund			CONTACT Jackie Terr						
2090 Summit Lake Drive				PHONE FAX (A/C, No, Ext): (A/C, No): 850-320-6939					
Tallahassee, FL 32317				E-MAIL ADDRESS: Jackie.Terr@fsrmf.org					
,				INSURER(S) AFFORDING COVERAGE NAIC #					
						BILE RISK PROGRAM (SHAF	RP)		
INSURED				INSURER B:					
Okaloosa County Sheriff's Office				INSURER C:					
50 2nd Street				INSURER D:					
Shalimar, FL 32579				INSURER E:					
,				INSURER F:					
CO	/ERAGES CERTIFICATE NU	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	NSR ADDLISUBR LTR TYPE OF INSURANCE INSR WYD POLICY NUMBER			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
	GENERAL LIABILITY			111111111111111111111111111111111111111	(11111221111111	EACH OCCURRENCE	\$		
	COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED	\$		
	CLAIMS-MADE OCCUR						\$		
						PERSONAL & ADV INJURY	\$		
						GENERAL AGGREGATE	\$		
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG	\$		
	POLICY PRO- JECT LOC						\$		
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	ş 500,	000	
	ANY AUTO	22-FSRMF-46		10/01/2021	10/1/2022	BODILY INJURY (Per person)	\$		
A	ALL OWNED X SCHEDULED AUTOS			10/01/2021		, , , , ,	\$		
. [HIRED AUTOS NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$		
	X PHYSICAL DAMAGE COVERAGE SUE	SJECT TO DEDUCTIBLE COM	AP & CC	LLISION: \$	500		\$		
	UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$		
	DED RETENTION \$						\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N					WC STATU- OTH- TORY LIMITS ER			
ANY PROPRIETOR/PARTNER/EXECUTIVE N/A						E.L. EACH ACCIDENT	\$		
	(Mandatory In NH)					E.L. DISEASE - EA EMPLOYEE	\$		
	if yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$		
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACOR	D 101, Additional Remarks Sc	chedu						
Evidence of auto coverage for Okaloosa County Sheriff's Office				CONTRACT# C19-2841-AP					
Airport Contract				OKALOOSA COUNTY SHERIFF'S OFFICE					
zmport volume				SECURITY, LAW ENFORCEMENT					
				AND AIRPORT OPERATIONS					
		EXPIRES: 09/30/2022							
		:							
CERTIFICATE HOLDER CANCEL					NCELLATION 30 DAY WRITTEN NOTICE				
Okaloosa County Board of County Commissioners				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE					
5479 A. Old Bethel Road				THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN					
Crestview, FL 32536				ACCORDANCE WITH THE POLICY PROVISIONS.					
				AUTHORIZED REPRESENTATIVE					
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				facta fer					