

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/31/2022

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 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 Marsh USA Inc.				_	CONTACT NAME:	GeeAnn Missi		
400 West Market Street, Suite 700					PHONE (A/C, No. Ext):	866-966-4664	FAX (A/C, No): 212-94	8-0804
Louisville, KY 40202			E-MAIL ADDRESS: Louisville.CertRequest@marsh.com					
Attn: Louisville.certrequest@marsh.com						INSURER(S) AFFORDII	NG COVERAGE	NAIC#
CN101863513-DAA-GAWUE-22-23	2823	Browne	SO	2022	INSURER A : M	itsui Sumitomo Insurance US/	A Inc	22551
INSURED Daikin Applied Americas Inc.					INSURER B : Se	entry Casualty Company		28460
dba Daikin Applied dba Daikin Applied					INSURER C : Se	entry Insurance Company		24988
13600 Industrial Park Boulevard Minneapolis, MN 55441				INSURER D: Travelers Casualty and Surety Company of America			31194	
					INSURER E :			
					INSURER F :			
COVERAGES	CEF	RTIFICAT	E NUM	BER:	CLE-006439	458-10 RI	EVISION NUMBER: 4	

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	ADDL		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
Α	X COMMERCIAL GENERAL LIABILITY			GL 2122557	04/01/2022	04/01/2023	EACH OCCURRENCE	\$	1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000
							MED EXP (Any one person)	\$	10,000
	X SIR: \$400,000						PERSONAL & ADV INJURY	\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000
	POLICY X PRO- X LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000
	OTHER:							\$	
Α	AUTOMOBILE LIABILITY			BVR8406442 (AOS)	04/01/2022	04/01/2023	COMBINED SINGLE LIMIT (Ea accident)	\$	2,000,000
l	X ANY AUTO						BODILY INJURY (Per person)	\$	
A	X OWNED SCHEDULED AUTOS			BVM8803074 (MA)	04/01/2022	04/01/2023	BODILY INJURY (Per accident)	\$	
	X HIRED X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
L							DEDUCTIBLE	\$	350,000
A	X UMBRELLA LIAB X OCCUR			UMB5700287	04/01/2022	04/01/2023	EACH OCCURRENCE	\$	19,000,000
-	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	19,000,000
	DED RETENTION \$							\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			90-20216-02 (Daikin Ded.)		04/01/2023	X PER OTH-		
C	ANYPROPRIETOR/PARTNER/EXECUTIVE	N/A		90-20216-03 - (Daikin Retro)	04/01/2022	04/01/2023	E.L. EACH ACCIDENT	\$	1,000,000
	(Mandatory in NH)		Deductible: \$500,00	Deductible: \$500,000		E.L. DISEASE - EA EMPLOYEE	\$	1,000,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
D	Manufacturers E&O			106892185	04/01/2022	04/01/2023	Limit		5,000,000
							SIR		250,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Okaloosa County Board of County Commissioners is/are included as additional insured (except workers compensation and Manufacturers E&O) where required by written contract and allowed by law. This insurance is primary and non-contributory over any existing insurance and limited to liability arising out of the operations of the named insured and where required by written contract. Waiver of subrogation is applicable where required by written contract and allowed by law.

CONTRACT # C19-2824-FM DAIKIN APPLIED CHILLER MAINTENANCE EXPIRES: 07/30/2024

CERTIFICATE HOLDER	-	CANC

Okaloosa County Board of County Commissioners 5479 Old Bethel Road Crestview, FL 32536

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

**AUTHORIZED REPRESENTATIVE** 

Marsh USA Inc.