



ALLEAIR-01

MSTEITZ

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/28/2023

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.

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.

PRODUCER: Fresno CSG-Alliant Insurance Services, Inc. CONTACT NAME: INSURER(S) AFFORDING COVERAGE: Starr Indemnity & Liability Company NAIC #: 38318

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 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.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liability, and Workers Compensation.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may I CONTRACT:L16-0440-AP ALLEGIANT AIR, LLC SIGNATORY AIRLINE AGREEMENT AND TERMINAL BUILDING EXPIRES:Holdover Status - Amendment in Negotiation

CERTIFICATE HOLDER CANCELLATION

Okaloosa County 5479 A 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 [Signature]



Alliant Insurance Services, Inc.
9 E River Park Place East, Suite 310
Fresno, CA 93720
Main: 559-374-3560
Fax: 559-374-3699
License #0C36861

CERTIFICATE OF INSURANCE AA-23-180

This is to certify to: Okaloosa County
5479 A Old Bethel Road
Crestview, FL 32536

That: Allegiant Travel Company, Allegiant Air, LLC, Sunrise Asset Management, LLC and any firm or corporation affiliated to, subsidiary to, associated with or under the same management as any corporation herein named as now existing or as shall hereafter be created
1201 N. Town Center Drive
Las Vegas, NV 89144

As of this date, has arranged for the following insurance coverage(s) for the period and with underwriters as identified on the attached Security Sheet.

COVERAGES:

COMPREHENSIVE AIRLINE LIABILITY INSURANCE

Including but not limited to: Comprehensive General Liability, Bodily Injury and Property Damage to Third Parties, Passenger Liability, Personal Injury Liability, Contractual Liability, Passengers' Checked and Unchecked Baggage Liability, Premises, Products, Ground Hangarkeepers and Completed Operations Liabilities, Liquor Liability, On Airport Automobile, Off Airport Excess Automobile, Employers' and Cargo Legal Liabilities.

Combined Single Limit

Each Occurrence*
USD \$500,000,000

AVN52E Aviation War Risk Liability sublimit of

USD \$350,000,000

Excess AVN 52E War Risk Liability limit of

USD \$875,000,000

Personal Injury & Advertisers Liability (except passengers): Limited to \$25,000,000 any one offense, in the aggregate annually.

Excess Automobile and Employers' Legal Liabilities: This insurance shall act as excess of underlying policy limits Up to a Maximum Limit of Liability of \$25,000,000 any one occurrence.

*REFER TO THE POLICY. AN ANNUAL AGGREGATE LIMIT APPLIES TO SOME COVERAGES.

GEOGRAPHICAL LIMITS: Worldwide

CONTRACT(S):

AIRCRAFT INSURED: Any Aircraft owned, used, maintained and/or operated by the Named Insured.

OTHER COVERAGES/CONDITIONS/REMARKS

Subject always to the scope of the attached policies and all the policies' declarations, insuring agreements, terms, conditions, limitations, exclusions, deductibles, warranties and endorsements thereof remaining paramount: Solely as respects: (i) The Coverage(s) noted above; (ii) the Contract(s) (and then only to the extent of the Named Insured's obligation to provide insurance under the terms of the Contract(s); and (iii) the operations of the Named Insured; the policies are endorsed to include the following provision(s):

Okaloosa County, their Directors, Officers, Members, Employees and Agents are named as Additional Insured with respect to liability arising out of the activities performed by or on behalf of the Named Insured.

This policy is Primary and Non-Contributory with respect to any and all insurance policies purchased by the City of Aurora.

In the event of cancellation or material changes of the policies by insurers which would adversely affect the interests of the Additional Insureds. Insurers agree to provide 30 days (ten (10) days in the event of cancellation for non-payment of premiums) prior written notice to the Certificate Holder(s).

This Certificate of Insurance is issued as summary of the Insurances under the policies noted above and confers no rights upon the Certificate Holders as regards the Insurances other than those provided by the policies. The undersigned has been authorized by the above Insurers to issue this certificate on their behalf and is not an Insurer and has no liability of any sort under the above policies as a result of this certification.



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This certificate or verification of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term, or condition of any contract or other document with respect to which this certificate or verification of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all terms, exclusions, limitations and conditions of such policies (including, but not limited to an Electronic Date Recognition Exclusion Clause, and a related Electronic Date Recognition Exclusion Limited Coverage Endorsement; copies of which will be made available on request).

A handwritten signature in black ink, appearing to read "M. L. Matthews", is written over a horizontal line.

Authorized Representative

10/1/2023

Date



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CERTIFICATE OF INSURANCE AA-23-180

SECURITY SHEET

POLICY TERM: October 1, 2023 to October 1, 2024, on both dates at 12:01 AM Local Standard Time at the address of the Named Insured.

INSURER	POLICY NUMBER	PERCENTAGE SHARE
Starr Surplus Lines Insurance Company Per Starr Aviation Agency, Inc	SASLAMR63603618-09	16.75%
Allianz Global Risks US Insurance Company	A1AL000004418AM	10.00%
XL Specialty Insurance Company	UA000011117AV18A	8.50%
QBE North America	QAVC000366	5.00%
Air Centurion	TBD	1.0%
Applied Underwriters	TBD	2.50%
Various carriers per Gallagher Aviation	TBD	56.25%

La Reunion Aerienn
Munich Re
Swiss Re
AXIS
Sirius
Helvetia
Airline One Convex
Airline One Fidelis
Airline One Starr
Airline One Mapfre
Partner Re
Convex
Travelers
Chubb

POLICY TERM: October 1, 2022 to October 1, 2023, on both dates at 12:01 AM Local Standard Time at the address of the Named Insured.

HULL WAR, HI-JACKING & OTHER PERILS INSURERS

Underwriters at Lloyds of London and other Licensed Companies per Gallagher Aviation.
Liberty Syndicate Services Ltd. LIB 4472
Castel Underwriting Agencies trading as Altitude Risk Partners

POLICY NUMBER

J51816718

POLICY TERM: October 1, 2022 to October 1, 2023, on both dates at 12:01 AM Local Standard Time at the address of the Named Insured.

EXCESS AVN52E AVIATION LIABILITIES INSURERS

Underwriters at Lloyds of London and other Licensed Companies per Gallagher Aviation.
Talbot Underwriting Services (US) LTD / Lloyds Syndicate 4472 LIB
Talbot Underwriting Services (US) LTD / Lloyds Syndicate 1183 TAL
Lloyds Syndicate 510 KLN / Lloyds Syndicate 510 KLN
Lloyds Syndicate 4000 PEM / Lloyds Syndicate 4000 PEM
Torus Insurance (Europe) AG
Canopus Underwriting Agency, Inc. / Lloyds Syndicate 4444 CNP
Canopus Underwriting Agency, Inc. / Lloyds Syndicate 958 CNP
Lloyds Syndicate 1225 AES
Lloyds Syndicate 2015 CHN

POLICY NUMBER

J51818719

J51816720

SEVERAL LIABILITY NOTICE



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The subscribing insurers' obligations under contracts of insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscriptions. The subscribing insurers are not responsible for the subscription of any co-subscribing insurer who for any reason does not satisfy all or part of its obligations. LSW 1001 (Insurance)