

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/10/2017

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).											
PRODUCER						CONTACT NAME: Stephanie Weiss					
Specialty Insurance Agency					PHONE 745 040 0000 FAX 745 040 4057						
Performers of the U.S.								(A/C, No):	113-2	240-4257	
_). Box 24			E-MAIL address: certs@specialtyinsuranceagency.com							
New Richmond, WI 54017						INSURER(S) AFFORDING COVERAGE NAIC #					
						RA: Evansto	on Insurance	Company		35378	
INSURED Chad S. Taylor					INSURER B:						
dba Chad Taylor, Mad Chad 4138 McConnell Blvd					INSURER C:						
Los Angeles, CA 90066					INSURER D:						
255 / Higolos, 5/1 00000					INSURER E :						
					INSURER F:						
COVERAGES CERTIFI				NUMBER:	REVISION NUMBER:						
			/E 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.											
			POLICIES. LIMITS SHOWN MAY HAVE ADDL SUBR								
LTR	TYPE OF INSURANCE		WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS			
	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$ 3,0	00,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	Ψ	0,000	
								MED EXP (Any one person)	\$ 5,0	00	
Α		X	Х	2CN0156-3121		04/25/2017	04/24/2018	PERSONAL & ADV INJURY	\$ 3,0	00,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 5,0	00,000	
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG		00,000	
	OTHER:							TRODUCTO COMITYOT ACC	\$,	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	\$		
	ANY AUTO							(Ea accident) BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED							, , ,	\$		
	AUTOS ONLY AUTOS NON-OWNED							BODILY INJURY (Per accident) PROPERTY DAMAGE			
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$		
									\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION\$								\$		
	WORKERS COMPENSATION							PER OTH- STATUTE ER			
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$		
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A						E.L. DISEASE - EA EMPLOYEE			
If yes, describe under DESCRIPTION OF OPERATIONS below								E.L. DISEASE - POLICY LIMIT	\$		
	DESCRIPTION OF OPERATIONS DEIOW							E.L. DISEASE - POLICY LIMIT	φ		
	BUSINESS PERSONAL PROPERTY -								•		
Α	A INLAND MARINE						AGGREGATE	\$			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) PERFORMER IS A NAMED INSURED AS A MEMBER OF PERFORMERS OF THE U.S.:											
Cili	ad S. Taylor dba Chad Taylor, Mad Cha	u									
	PTIEICATE HOLDED		CANC	CANCELLATION							
CERTIFICATE HOLDER						CANCELLATION					
Chad S. Taylor dba Chad Taylor, Mad Chad 4138 McConnell Blvd Los Angeles, CA 90066						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									
						Stephanie Weiss					