

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/31/2023

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 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

						to the	cert	ificate holder in lieu of su	uch end	lorsement(s)	)					
PRODUCER License # 0252636 United Agencies 301 E. Colorado Blvd., #200 Pasadena, CA 91101										CONTACT NAME:						
										PHONE (A/C, No, Ext): (626) 449-6310 FAX (A/C, No): (626)						
										E-MAIL ADDRESS:						
	uuc.	iu, on	01101						INSURER(S) AFFORDING COVERAGE						NAIC #	
									INSURER A : Sompo America Insurance Company					11126		
INICI	IDEN														111120	
INSURED										INSURER B:						
		E	Busines	ss Na	ame and Ac	ldres	SS		INSURER C :							
										INSURER D:						
									INSURER E :							
									INSURER F:							
		AGES						E NUMBER:		EEN LOOLED	TO THE INCH	REVISION NUM			01.101/1050105	
II C	IDIC/ ERTI	ATED. FICATE	NOTWITE MAY B	THSTA	ANDING ANY I SUED OR MAY	REQUI PER	REM TAIN, CIES.	SURANCE LISTED BELOW ENT, TERM OR CONDITION THE INSURANCE AFFOR LIMITS SHOWN MAY HAVE	N OF A	ANY CONTRA Y THE POLIC	CT OR OTHER	R DOCUMENT WIT	H RESPE	CTT	O WHICH THIS	
NSR	NSR LTR TYPE OF INSURANCE							POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMITS		S		
A	X						SUBR		-10	100000011111	400000000000000000000000000000000000000	EACH OCCURRENCE	E I	\$	1,000,000	
	CLAIMS-MADE X OCCUR					x	AGM30027150101			11/1/2023	11/1/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)		s	500,000	
						^						MED EXP (Any one		\$	15,000	
												PERSONAL & ADV INJURY \$		1,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- OTHER											GENERAL AGGREGATE \$		2,000,000		
												PRODUCTS - COM		\$	2,000,000	
												T NODOCTO COM	701 700	\$		
A	AUTOMOBILE LIABILITY					+					11/1/2024	COMBINED SINGLE	LIMIT	9	1,000,000	
	X ANY AUTO							AAM30012707302	11/1/2	11/1/2023		(Ea accident)		2		
	OWNED SCHEDULED					1		77711100012101002		117172020	11/1/2024	BODILY INJURY (Pe		\$		
	AUTOS ONLY AUTOS HIRED NON-OWNED AUTOS ONLY AUTOS ONLY				AUTOS NON-OWNED							BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$		\$		
					AUTOS ONLY							(Per accident)				
Α	$\vdash$	WMBRELLA LIAB X OCCUR X EXCESS LIAB CLAIMS-MADE			+							_	\$	10,000,000		
	Y							033090395		11/1/2023	11/1/2024	EACH OCCURRENCE	)E	\$	10,000,000	
	_				-				AGGREGATE			-	\$	,,		
A	DED RETENTION \$  WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  Y/N					-		JCD40016Q0		11/1/2023	11/1/2024	X PER STATUTE	OTH-	\$		
													LER		1,000,000	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)  If yes, describe under DESCRIPTION OF OPERATIONS below  Liquor Liability							002 10010 10		1.11.112020		E.L. EACH ACCIDE		\$	1,000,000	
												E.L. DISEASE - EAL			1,000,000	
Α								AGM30027150101		11/1/2023	11/1/2024	E.L DISEASE - POL		\$	1,000,000	
	Liq	301 E16	Dility					A0000027100101		117172020	11/1/2024	Lacii Occiragg	i egute		1,000,000	
	4															
_																
DES	CRIPT	ION OF	OPERATIO	NS / LC	CATIONS / VEHIC	LES (	ACORI	D 101, Additional Remarks Schedu	ule, may b	e attached if mo	re space is requi	red)				
Inc	lude:	Busir	iess Nan	ne. Bı	usiness Addre	ess. C	utdo	oor seating area (if applica	able)							
				,		,		3 a. c. ( appc.	,							
) i 4	- £ NI		la ia ia al	المساميا		! !										
اد	OT N	apervil	ie is inci	iuaed	as an Additio	nai in	sure	2)				O.				
CE	RTIF	ICATE	HOLD	ER					CANCELLATION							

City of Naperville **Attn: Community Services Department** 400 S. Eagle Street Naperville, IL 60540

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**