

Client#: 16403 CITYRES

## ACORD...

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/12/2020

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 any rights to the certificate holder in lieu of such endorsement(s).

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PRODUCER	CONTACT MJ Insurance, Inc.					
MJ Insurance, Inc.	PHONE (A/C, No, Ext): 317 805-7542 FAX (A/C, No): 317 8	05-7515				
PO Box 3430	E-MAIL ADDRESS: certificate@mjinsurance.com					
Carmel, IN 46082-3430	INSURER(S) AFFORDING COVERAGE	NAIC#				
317 805-7500	INSURER A: The Cincinnati Insurance Company	10677				
INSURED	INSURER B : Amerisure Mutual Insurance Co.	23396				
Cityscape Construction-DTLS, LLC	INSURER C:					
8335 Keystone Crossing, Suite 220	INSURER D:					
Indianapolis, IN 46240	INSURER E:					
	INSURER F:					

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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR		TYPE OF INSURANCE	ADDL INSR	SUBR		POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMIT	S
Α	Х	CLAIMS-MADE X OCCUR	Y	Υ	ENP0566560	02/28/2020	02/28/2021	EACH OCCURRENCE  DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000 \$500,000
								MED EXP (Any one person)	\$10,000
								PERSONAL & ADV INJURY	\$1,000,000
	GEN	N'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
		POLICY X PRO- JECT X LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
		OTHER:							\$
Α	AUT	OMOBILE LIABILITY	Υ	Υ	ENP0566560	02/28/2020	02/28/2021	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
		ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	X	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
									\$
Α	X	UMBRELLA LIAB X OCCUR	Υ	Υ	ENP0566560	02/28/2020	02/28/2021	EACH OCCURRENCE	\$10,000,000
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$10,000,000
		DED X RETENTION \$0							\$
В		RKERS COMPENSATION DEMPLOYERS' LIABILITY		Υ	WC20994540502	02/28/2020	02/28/2021	X PER OTH- STATUTE ER	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE Y/N ICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$1,000,000
	(Ma	ndatory in NH)	, A		3A STATES INCL:	FL IN KS	KY MO	E.L. DISEASE - EA EMPLOYEE	\$1,000,000
		s, describe under CRIPTION OF OPERATIONS below			3C STATES EXCL:	ND OH WA	WY PR US	L. DISEASE - POLICY LIMIT	\$1,000,000
Α	RE	NTED/LEASED			ENP0566560	02/28/2020	02/28/2021	LIMIT: \$350,000	
	EQ	UIPMENT						<b>DEDUCTIBLE: \$500</b>	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The additional insured and waiver of subrogation boxes above are marked based on the policy information shown below.

The Certificate Holder and others as defined in the written agreement and the General Liability additional insured Endorsement GA233 09/17 (see attached endorsement) and Automobile Liability endt AA4171 11/05 are (See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION
City of Lee's Summit, Public Works Dept/Engineering Division 220 SE Green Street	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Lees Summit, MO 64063	AUTHORIZED REPRESENTATIVE
	Anthony & Pransaster

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DESCRIPTIONS (Continued from Page 1)
included as additional insured subject to the terms, conditions and exclusions on the policy(s).
Waiver of Subrogation applies to General Liability per Endorsement GA233 09/17, Automobile Liability endt AA 4172 11/05, Workers Compensation per endt WC000313 04/84 subject to the terms, conditions and exclusions on the policy(s) as permitted by law, when required by written contract.
Primary & Noncontributory applies to General Liability per Endorsement GA233 09/17, Automobile Liability endt A4174 11/05, and Umbrella Liability endt US4096 11/16 subject to the terms, conditions and exclusions on the policy(s).
Umbrella is form following in regard to Additional Insured and Waiver of Subrogation as defined by Endorsement US101UM 12/04 and subject to the policy terms, conditions and exclusions on the policy.

CITYSCAPE CONSTRUCTION VIEW HIGH LLC Licensing 8335 KEYSTONE CROSSING STE 220 INDIANAPOLIS, IN 46240



**BUSINESS LICENSE** 

Issuance No. LC100170671

EXPIRES: 09/30/2021

License is Hereby Granted to: CITYSCAPE CONSTRUCTION VIEW HIGH LLC

Business Classification: 100 General Contractor (A)

Subject to the provisions of all Ordinances now in force and

that may hereafter be passed by said City of Lee's Summit

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THIS LICENSE MUST BE DISPLAYED IN A PROMINENT PLACE AND IS NON-TRANSFERABLE