



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/1/2024

11/13/2023

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 this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Lockton Companies 444 W. 47th Street, Suite 900 Kansas City MO 64112-1906 (816) 960-9000 kcasu@lockton.com	CONTACT NAME: PHONE (A/C, No. Ext): E-MAIL ADDRESS:	FAX (A/C, No):
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Travelers Property Casualty Company of America		25674
INSURER B: The Travelers Indemnity Company		25658
INSURER C: Zurich American Insurance Company		16535
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES * **CERTIFICATE NUMBER:** 1910717 **REVISION NUMBER:** XXXXXXXX

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:	Y	Y	VTC2JCO2793C179TIL23	11/1/2023	11/1/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	N	N	VTJ-CAP-2793C180-TIL-23	11/1/2023	11/1/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	N	N	CUP2794C140-23-25	11/1/2023	11/1/2024	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ XXXXXXXX
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	UB4R0072312325K	11/1/2023	11/1/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A C	EQUIPMENT FLOATER BLANKET BUILDERS RISK	N	N	QT6301J678811TIL23 MBR-9544355-00	11/1/2023 11/1/2023	11/1/2024 11/1/2024	LEASED & RENTED \$1,600,000 PER ITEM/ALS, \$1,000 DED ***SEE ATTACHMENT***

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

CITY OF LEE'S SUMMIT IS ADDITIONAL INSURED ON GENERAL LIABILITY, IF REQUIRED BY WRITTEN CONTRACT. WAIVER OF SUBROGATION IN FAVOR OF THE ADDITIONAL INSURED APPLIES ON GENERAL LIABILITY, AS REQUIRED BY WRITTEN CONTRACT AND WHERE ALLOWED BY LAW. COVERAGE IS SUBJECT TO THE TERMS AND CONDITIONS OF THE POLICY.

CERTIFICATE HOLDER**CANCELLATION** See Attachment

1910717
CITY OF LEE'S SUMMIT
207 SW MARKET
PO BOX 1600
LEE'S SUMMIT MO 64063

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

© 1988-2015 ACORD CORPORATION. All rights reserved.

BLANKET BUILDERS RISK:

\$250,000,000 MAXIMUM LIMIT OF LIABILITY FOR EACH INSURED PROJECT, EXCEPT:

- \$25,000,000 JOISTED MASONRY
- \$10,000,000 WOOD FRAME

AS REPORTED SOFT COST/DELAY IN COMPLETION

\$5,000,000 TRANSIT

\$5,000,000 TEMPORARY OFFSITE LOCATION

\$5,000,000 CONTRACTORS ADDITIONAL EXPENSE

CATASTROPHE PERILS:

- \$10,000,000 EARTHQUAKE – HIGH HAZARD ZONE 1
- \$25,000,000 EARTHQUAKE – MEDIUM HAZARD ZONE 2
- \$250,000,000 EARTHQUAKE – LOW HAZARD ZONE 3 & 4
- \$10,000,000 FLOOD – HIGH HAZARD, LEVEL 1, ZONE A, AE, V, VE, D
- \$25,000,000 FLOOD – MEDIUM HAZARD, LEVEL 2, B, X (SHADED)
- \$250,000,000 FLOOD – LOW HAZARD, LEVEL 3, C, X (UNSHADED)
- \$10,000,000 NAMED WINDSTORM – LEVEL 1
- \$25,000,000 NAMED WINDSTORM – LEVEL 2
- \$250,000,000 NAMED WINDSTORM – LEVEL 3

DEDUCTIBLES:

ALL OTHER PERILS

- \$10,000 PROJECTS UNDER \$150,000,000
- \$25,000 PROJECTS OVER \$150,000,000
- \$50,000 PROJECTS WITH CONSTRUCTION TYPE OF WOOD FRAME & JOISTED MASONRY

WATER DAMAGE

- \$50,000 ALL OTHER PROJECTS
- \$100,000 PROJECTS OVER \$150,000,000, CONSTRUCTION TYPE OF WOOD FRAME AND JOISTED MASONRY

EARTHQUAKE DEDUCTIBLES

- 2.5%/\$250,000/60 DAYS EARTHQUAKE – HIGH HAZARD ZONE 1
- 2.5%/\$100,000/60 DAYS EARTHQUAKE – MEDIUM HAZARD ZONE 2
- SAME AS ALL OTHER PERILS EARTHQUAKE – LOW HAZARD ZONE 3 & 4

FLOOD DEDUCTIBLES:

- 5.0%/250,000/60 DAYS FLOOD – HIGH HAZARD, LEVEL 1,
- 2.5%/\$100,000/60 DAYS FLOOD – MEDIUM HAZARD, LEVEL 2,
- SAME AS ALL OTHER PERILS FLOOD – LOW HAZARD, LEVEL 3,

NAMED WINDSTORM DEDUCTIBLES:

- 5.0%/250,000/60 DAYS NAMED WINDSTORM – LEVEL 1
- 2.5%/\$100,000/60 DAYS NAMED WINDSTORM – LEVEL 2
- SAME AS ALL OTHER PERILS NAMED WINDSTORM – LEVEL 3