

CERTIFICATE OF LIABILITY INSURANCE

RBECKMAN

DATE (MM/DD/YYYY) 1/8/2024

TACENER-01

_		_	-															/0/2024		
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 Ally Denman								
Alliant Insurance Services, Inc. 1421 Hanz Dr New Braunfels, TX 78130							, Inc	C.				PHONE (A/C, No, Ext): (830) 387-7029 FAX (A/C, No								
												E-MAIL ADDRESS: Allyson.Millard@alliant.com								
ľ				,														NAIC #		
												INSURER(S) AFFORDING COVERAGE				anv	20699			
ŀ	INSU											INSURER A : ACE Property & Casualty Insurance Com					Juny	20303		
	111201	RED					_					INSURER B : Great Northern Insurance Company								
				CMS								INSURER C : Starr Indemnity & Liability Company					38318			
29 Maumelle Curve Court North Little Rock, AR 72113												INSURER D : Argonaut Insurance Company						19801		
								.,,,				INSURER E : Lloyd's Syndicate 2488 Chubb Underwriting Agencies						00000		
												INSURER F : Lloyd's Syndicate 2121 (Argenta Syndicate Management Li				mited)	00000			
COVERAGES CERTIFICATE NUMBER:									RTIFI	CAT	E NUMBER:				REVISION NUI	MBER:				
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHI																				
														ED BY THE POLICIES DESCRIBE						
		CLU	JSIO	NS AND) CC	NDI	TION	IS OF SUCH			. LIMITS SHOWN MAY HAVE	BEEN F			I					
Ľ	NSR LTR			TYPE	OF I	NSUF	RANC	E	ADDL INSD	SUBF WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS					
	A	Х	CON	MERCIA	LGE	INER		IABILITY							EACH OCCURREN		\$	1,000,000		
				CLAIMS	IS-MADE X OCCUR					G46608288 007		2/28/2023	2/28/2024	DAMAGE TO RENT PREMISES (Ea occ	ED urrence)	\$	500,000			
	[MED EXP (Any one		\$	10,000			
	ľ		1									PERSONAL & ADV INJURY \$			1,000,000					
		GEN'L AGGREGATE LIMIT APPLIES PER:											GENERAL AGGREGATE \$			2,000,000				
	ł												PRODUCTS - COMP/OP AGG \$			2,000,000				
													\$							
ŀ											COMBINED SINGLE LIMIT			1,000,000						
						99511044		2/28/2023	2/28/2024	(Ea accident)										
		ANY AUTO				HEDULED			55511044		2/20/2023	2/20/2024	BODILY INJURY (Per person) \$							
	ŀ	Х	AUTOS ONLY HIRED AUTOS ONLY		v									BODILY INJURY (P						
	-	^	AUT	AUTOS ONLY	Y	^		ION-OWNED UTOS ONLY							PROPERTY DAMAGE (Per accident)		\$			
+	С	v					X OCCUR										\$	5,000,000		
		X							1000586864231		2/28/2023	2/28/2024	EACH OCCURRENCE \$		\$	5,000,000				
	┝		EXCESS LIAB			-			-		100000004201	2/20/2020					\$	0,000,000		
+		DED RETENTION \$								-					Y PER	OTH-	\$			
	-	AND EMPLOYERS' LIABILITY						V / N			00 005 045440 4	2/28/2023		2/28/2024	X PER STATUTE	ER		4 000 000		
		-							N/A		92-895-845142-4	2/28/2023	E.L. EACH ACCIDE		NT	\$	1,000,000			
															E.L. DISEASE - EA	EMPLOYEE	\$	1,000,000		
								below							E.L. DISEASE - POLICY LIMIT \$		1,000,000			
	- 1										B0621PENER008023		2/28/2023	2/28/2024	Poll Each Occ/Agg			2,000,000		
	F Pollution Liability								B0621PENER009823			2/28/2023 2/28/2024		Poll Each Occ/Agg			3,000,000			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)										red)										
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) -Umbrella and Excess Liability: Umbrella Policy #1000586864231 (2/28/2023-2/28/2024) is with Starr Indemnity and has a \$5,000,000 limit/aggregate.												te. The								
Excess Liability Policy # NHA101029 (2/28/2023-2/28/2024) is with RSUI Indemnity Company and has an excess limit/aggregate of \$5,000,000 over the policy. These policies together provide \$10,000,000 in coverage. Both the Umbrella and Excess Liability policies are follow form over the underlying the term of the underlying term over term																				
											& Omissions & Pollution: L									
þ	_iabi	lity	\$2,00	0,000	eac	h cla	ıim;	\$2,000,000	Aggr	egate	with \$25,000 deductible A	ND The	Excess Prof	essional & P	ollution policy is	with Llo	yds of	London Policy		
#B0621PENER009823 (2/28/2023-2/28/2024) and has an excess limit/aggregate of \$3,000,000 over the \$2M Lloyd's policy. These policies together provide \$5,000,000 in coverage. They are Claims made and reported coverage form.											r provide									
				ED AC				e ciaims m	aue a	na re	eported coverage form.									
- 1 i																				

CERTIFICATE HOLDER	CANCELLATION						
City of Lee's Summit 220 SE Green Lees 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						
	Byn R Daf						

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	AGEN	ICY CUSTOMER ID: TACENER-01		RBI	ECK	MAN						
		LOC #: 29										
ACORD												
ADDITIONAL	_ REMA	ARKS SCHEDULE	Page	1	of	1						
AGENCY		NAMED INSURED										
Alliant Insurance Services, Inc.		CMS Wireless, LLC 29 Maumelle Curve Court										
POLICY NUMBER		North Little Rock, AR 72113										
SEE PAGE 1		_										
	NAIC CODE											
	SEE P 1	EFFECTIVE DATE: SEE PAGE 1										
ADDITIONAL REMARKS												
	THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,											
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability	ty Insurance											
Description of Operations/Locations/Vehicles: -Other States Workers Compensation Coverage: Argonaut Midwest Insurance Company (2/28/2023-2/28/2024) Policy #WC92-395-846142+1: Limits of Employers Liability \$1,000,000 Each accident, policy limit and each employee. Argonaut policy covers A2, NM, AL, MS, OK, CA, CO, AR, GA, LA, MT, PA, ID, FL, IA, NE, LI, KS, KY, TN, MO, IN, UT, OR, NV, MN, & MC. Other States coverage covers all states including those listed previously except NY, ND, OH, TX, WA, and WY. Coverage for TX is under Policy #0001302345 with Texas Mutual (228/2023-228/22024): Limits of Employers Liability \$1,000,000 Each accident, policy limit and each employee. -Drone Coverage - Designated Unmanned Aircraft Coverage included on the General Liability policy with ACE American Insurance Company Policy #C46608228 007 with a \$1,000,000 in Unmanned Aircraft Liability Aggregate. Limitation of Coverage for Unmanned Aircraft System included on the Umbrella policy with Starr policy #100058664231 with limits of \$5,000,000 each/aggregate. Excess Liability policy #NHA101029 with RSUI is Excess over Starr policy and provides \$5,000,000 in additional limits. Total Drone coverage forms CG 2010 0413 for Ongoing operations & CG 2037 0413 for Completed Operations. -The Gommercial Auto policy includes a blanket automatic additional insured endorsement that provides additional insured status to the certificate holder when there is an agreement requiring the insured to require such status to the certificate holder. -The Pollution policy includes a blanket automatic additional insured endorsement that provides additional insured status to the certificate holder when there is an agreement requiring the insured to require such status to the certificate holder. -The General Liability, Commercial Auto, Workers Compensation and Pollution policies contain a special provision with "Primary and Noncontributory" wording. -30 Days' Notice of Cancellation applies to the General Liability, Auto, Umbrella/Excess, Professi												
Extended Named Insured Schedule: DAS Purchaser 1 (Enertech Resources, LLC; Integrated Wireless Solution Telecommunications, Inc.; LH Consulting LLC; Ontivity Wireless, LLC; NexLevel Safety Training, LLC; Mountai	ns, LLC; JC /, LLC; Rigg	ET Holdings, LLC; Legacy Telecommunication gingCalc, LLC; TAC Enertech Resources Holdi	ns, LLC; L	.ega	су							