

COMMERCIAL GENERAL LIABILITY COVERAGE PART – <u>CLAIMS-MADE FORM</u> CERTIFICATE PAGE

IT IS AGREED THAT THIS CERTIFICATE IS ISSUED TO THE CERTIFICATE HOLDER LISTED BELOW TO CERTIFY COVERAGE UNDER THE COMMERCIAL GENERAL LIABILITY INSURANCE MASTER POLICY LISTED BELOW.

INSURANCE COMPANY: Certain Underwriters at Lloyds	POLICY NUMBER:
NAME OF INSURED: Beauty Health & Trade Alliance	JN1206
CERTIFICATE HOLDER: jamie brown, DBA Pets Paws & Pals	CERTIFICATE NUMBER:
ADDRESS: 777 adams street, cincinnati, OH 45215	PCI23655
POLICY PERIOD: 06/12/2019 to 06/12/2020 12:01 A.M. Standard Time at the Address of The Certificate Holder	
RETRO-DATE: 06/12/2019	

LIMITS OF INSURANCE		
General Aggregate Limit (Other Than Products-Completed Operations)	\$ 2,000,000	
Products-Completed Operations Aggregate Limit	\$ 2,000,000	
Personal and Advertising Injury Limit	\$ 1,000,000	
Each Occurrence Limit	\$ 1,000,000	
Damage to Premises Rented To You Limit	\$ 100,000	Any One Premises
Medical Expense Limit	\$ 5,000	Any One Person
Animal Bailee – Animals In Your Care, Custody or Control	\$ 15,000	Each Occurrence
	\$ 30,000	Aggregate Limit
Veterinarian Expense Reimbursement	\$ 1,000	Each Occurrence
	\$ 5,000	Aggregate Limit
	\$ 250	Deductible
Lost Key Liability Coverage	\$ 2,000	Each Occurrence
	\$ 2,000	Aggregate Limit

ADDITIONAL COVERAGE OPTIONS – Coverage Applies When Checked				
	Employee Coverage Elected			IITS OF INSURANCE vn above
1	Independent Contractors Elected	endent Contractors Elected Included in LIMITS OF INSURANCE shown above		
	Dog Training Coverage		Included in LIMITS OF INSURANCE shown above	
	House Sitting Coverage			IITS OF INSURANCE vn above
1	Pet Daycare Coverage		Included in LIMITS OF INSURANCE shown above	
	Pet Groomers Professional Liability		Included in LIMITS OF INSURANCE shown above	
\checkmark	Broadened Property Damage Coverage	\$	10,000	Each Occurrence
		\$	25,000	Aggregate Limit
	Employee Dishonesty (Bond)	\$	10,000	Each Occurrence
		\$	25,000	Aggregate Limit

FORMS AND ENDORSEMENTS applicable to all Coverage Parts and made part of this Policy at time of issue are listed on the attach Forms and Endorsements Schedule IL 88 01 (11/85).

SLC-3 Lloyds Jacket PC1110 Participation By Respective Contract LSW1135B Lloyds Privacy Policy Statement LL0017 11/98 Commercial General Liability - Claims-Made Form PC1002 Claims Reporting PC1004 Expense within Limits/Single Aggregate Limit PC1005 Minimum Policy Premium PC1007 Animal Bailee PC1009 Dog Training - Exclusion PC1012 Assault & Battery Exclusion PC1014 Exclusion - Professional Veterinarian Services PC1015 Misineus Exclusion Endorsement PC1016 Miscellaneous Exclusion Endorsement PC1017 Contractors Coverage Limitation PC1018 Athletic or Sports Participants Exclusion PC1020 Employment-Related Practices Exclusion PC1021 Total Liquor and State Approved Recreational Liability Exclusion PC1022 Limitation of Coverage to Business Description PC1023 Lost Key Coverage Exclusion PC1024 Exclusion – Injury to Any Temporary Workers, Volunteers, Casual Workers or Independent Contractors PC1025 Veterinarian Expense Reimbursement PC1026 Pet and Dog Breeding – Exc	Mandatory Forms	and Endorsement
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VER001Recording and Distribution of Material or Information in Violation of Law ExclusionCG2106 05/14Exclusion – Access or Disclosure of Confidential or Personal Information and Data-Related Liability	CG2184 01/08	Exclusion of Certified Nuclear, Biological, Chemical or Radiolical Acts of Terrorism
CG2106 05/14 Exclusion – Access or Disclosure of Confidential or Personal Information and Data-Related Liability	CG2149 09/99	Total Pollution Exclusion
Data-Related Liability	VER001	Recording and Distribution of Material or Information in Violation of Law Exclusion
LMA5218 Terrorism Risk Insurance Act	CG2106 05/14	
	LMA5218	Terrorism Risk Insurance Act

Optic	Optional Forms – Coverages Applies When Checked		
\checkmark	PC1008	Broadened Property Damage	
	PC1010	Employee Dishonesty	
	PC1013	House Sitting Exclusion	
\checkmark	PC1014	Pet Daycare Operation Exclusion	
	PC1015	Pet Groomers Professional Liability	
\checkmark	CG2026 04/13	Additional Insured – Designated Person or Organization	
	CG2001 04/13	Primary and Non-Contributory – Other Insurance Condition	
	CG2404 05/09	Waiver of Transfer of Rights of Recovery Against Other to Us	
	CG8802 11/85	Hired and Non-Owned Auto Liability	

Employee and Independent Contractor Schedule	
Richard Harris	Independent Contractor
Kaleb Brown	Independent Contractor
Deandrea Richardson	Independent Contractor

THIS INSURANCE IS SUBJECT TO ALL THE TERMS AND CONDITIONS, INCLUDING APPLICABLE ENDORSEMENTS, OF THE COMMERCIAL GENERAL LIABILITY INSURANCE MASTER POLICY. A COPY OF THE COMMERCIAL GENERAL LIABILITY INSURANCE MASTER POLICY ACCOMPANIES THIS CERTIFICATE. ADDITIONAL COPIES WILL BE PROVIDED TO THE CERTIFICATE HOLDER UPON REQUEST. PLEASE READ THE POLICY AND ALL ENDORSEMENTS.

IMPORTANT INFORMATION ON CLAIMS-MADE POLICY

THIS IS A CLAIMS MADE AND REPORTED POLICY. SUBJECT TO ITS TERMS, THIS POLICY APPLIES ONLY TO ANY CLAIM FIRST MADE AGAINST THE INSURED AND REPORTED IN WRITING TO THE UNDERWRITERS DURING THE POLICY PERIOD OR EXTENDED REPORTING PERIOD (AS SET OUT IN CLAUSE X. OF THE POLICY), IF APPLICABLE. DAMAGES AND CLAIMS EXPENSES SHALL BE APPLIED AGAINST THE DEDUCTIBLE. CLAIMS EXPENSES ARE WITHIN AND REDUCE THE LIMIT OF LIABILITY UNDER THIS POLICY. THE UNDERWRITERS SHALL NOT BE LIABLE FOR ANY DEFENSE COSTS OR FOR ANY JUDGEMENT OR SETTLEMENT AFTER THE LIMIT OF LIABILITY HAVE BEEN EXHAUSTED. PLEASE READ THIS POLICY CAREFULLY.

CLAIMS/INCIDENTS REPORTING

Full detail of any incident should be submitted via the customer dashboard. Questions can be sent via email to claims@vopins.com or by letter to Veracity Insurance

Solutions, 260 South 2500 West, Suite 303, Pleasant Grove UT 84062.

NO ADMISSION OF LIABILITY MAY BE MADE EITHER VERBALLY OR IN WRITING

Program Administrator:

Veracity Insurance Solutions, LLC 260 South 2500 West, Suite 303 Pleasant Grove UT 84062 888.568.0548 info@petcareins.com UNIQUE MARKET REFERENCE NUMBER:

B0572YF19ST11

AUTHORITY REFERENCE NUMBER:

YF19ST11

ADMINISTRATOR SIGNATURE: _____



Ohio

The insurance hereby evidenced is written by an approved nonlicensed insurer in the State of Ohio and is not covered in case of insolvency by the Ohio Insurance Guaranty Association.