ACORD	

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/30/2022

•									_	12/	/30/2022	
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).												
PRO	PRODUCER CONTACT											
Bene-Marc, Inc.						PHONE (A/C, No, Ext): (800) 247-1734 FAX (A/C, No): (817) 738-1811						
6301 Southwest Blvd., Suite 101 Fort Worth, TX 76132-1063						ADDRESS: contact@bene-marc.com						
(800) 247-1734					INSURER(S) AFFORDING COVERAGE					NAIC #		
						INSURER A : HDI Global Specialty SE					AA-1120822	
INSURED Northville Baseball/Softball Association					INSURER B : AXIS Insurance Company					37273		
-	PO Box 147					INSURER C :						
No	rthvi	ille, MI 48167				INSURER D : INSURER E :						
						INSURE						
со	VER	AGES CER	TIFIC	CATE	NUMBER: 5439-5332				REVISION NUMBER:		1	
	THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD											
С	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		SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
	X	COMMERCIAL GENERAL LIABILITY	Х		18LB3869-53320		1/1/2023	1/1/2024	EACH OCCURRENCE	\$	1,000,000.00	
		CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000.00	
А	X	INCLUDES Participant Legal Liability							MED EXP (Any one person)	\$	5,000.00	
	0.51								PERSONAL & ADV INJURY GENERAL AGGREGATE	Ŷ	1,000,000.00 5,000,000.00	
	GER	N'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG		2,000,000.00	
									* Medical Exp for Spec	+	, ,	
	AUT	OMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
		ANY AUTO							BODILY INJURY (Per person)	\$		
		OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$		
		AUTOS ONLY NON-OWNED							PROPERTY DAMAGE (Per accident)	\$		
										\$		
^	Х	UMBRELLA LIAB X OCCUR			18EX2653-53320		1/1/2023	1/1/2024	EACH OCCURRENCE		2,000,000.00 2,000,000.00	
A		CLAIMO-MADE							AGGREGATE	\$ <u>2</u> \$	2,000,000.00	
		RKERS COMPENSATION							PER OTH- STATUTE ER	φ		
	ANY	PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$		
	(Mar	ICER/MEMBEREXCLUDED?	N/A						E.L. DISEASE - EA EMPLOYEE	\$		
	If yes DES	s, describe under CRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
В	Ex	cess Accident Medical			SRPO-30000-4000-0	797	1/1/2023	1/1/2024	Limit 100,000.00 / Dec	ductibl	e 250.00	
DES	CRIPT		FS //		101. Additional Remarks Schodul	e, may h	e attached if mor	e space is require	ed)			
		rion of operations / Locations / vehicl licy includes a blanket additiona	al ins	ured	endorsement that provi	des a	dditional ins	ured status f	to the certificate holder	per fo	rm CG 20	
-	07/C	94. Ige Applies to Activities: Youth E	امەد	hall .	T-Ball Softball League							
		or Molestation Coverage - Each				regate	e Limit \$2,00	00,000.				
		ge for Sports Equipment - Polic							е.			
				1.55								
		FICATE HOLDER 5439-53320				CAN	CELLATION					
Atlantic Coast Baseball, LLC dba AC Sports P. O. BOX 87 Trafford, PA 15085					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 ALIDA LANNOV Hall						

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