

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 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 fieu of such endorsement(s).							
PRODUCER		CONTACT NAME:					
Bene-Marc, Inc.		PHONE (A/C, No, Ext):	PHONE (A/C, No, Ext): (800) 247-1734 FAX (A/C, No):				
6301 Southwest Blvd., Suite 101 Fort Worth, TX 76132-1063		E-MAIL ADDRESS:	contact@bene-marc.com				
(800) 247-1734			INSURER(S) AFFORDING COVERAGE				
,		INSURER A :	HDI Global Specialty SE		AA-1120822		
INSURED		INSURER B:	AXIS Insurance Company		37273		
Northville Baseball/Softball Association PO Box 147		INSURER C :	INSURER C:				
Northville, MI 48167		INSURER D :	INSURER D:				
Tronurino, ini 10101		INSURER E :	INSURER E :				
		INSURER F :					
COVERAGES	CERTIFICATE NUMBER: 5439	9-53320-248164	REVISION NUI	MBER:			
THIS IS TO CERTIFY THAT THE PO	LICIES OF INSURANCE LISTED BEL	OW HAVE BEEN ISS	SLIED TO THE INSURED NAMED ABOV	/E FOR THE POL	ICY 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		SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	X	COMMERCIAL GENERAL LIABILITY	X		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
	Χ	INCLUDES Participant Legal						MED EXP (Any one person) \$ 5,000.00
		Liability						PERSONAL & ADV INJURY \$ 1,000,000.00
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 5,000,000.00
		POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG \$ 2,000,000.00
		OTHER:						* Medical Exp for Spectators Only
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
		ANY AUTO						BODILY INJURY (Per person) \$
	OWNED SCHEDULED AUTOS ONLY AUTOS							BODILY INJURY (Per accident) \$
		HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
								\$
		UMBRELLA LIAB X OCCUR			18EX2653-53320	1/1/2023	1/1/2024	EACH OCCURRENCE \$ 2,000,000.00
Α	Χ	EXCESS LIAB CLAIMS-MADE						AGGREGATE \$ 2,000,000.00
		DED RETENTION\$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below							PER OTH- STATUTE ER
			N/A					E.L. EACH ACCIDENT \$
			"/~					E.L. DISEASE - EA EMPLOYEE \$
								E.L. DISEASE - POLICY LIMIT \$
В	B Excess Accident Medical				SRPO-30000-4000-0797	1/1/2023	1/1/2024	Limit 100,000.00 / Deductible 250.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
This policy includes a blanket additional insured endorsement that provides additional insured status to the certificate holder per form CG 20

Coverage Applies to Activities: Youth Baseball, T-Ball, Softball League.

Abuse or Molestation Coverage - Each Incident Limit \$1,000,000, Aggregate Limit \$2,000,000.

Coverage for Sports Equipment - Policy # 17IM1530-53320 \$20,000.00 limit with a \$500.00 deductible.

<b>CERTIFICATE HOLDER</b> 5439-53320-248164	CANCELLATION			
Charter Township of Northville 44405 Six Mile Northville, MI 48168	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
1	AUTHORIZED REPRESENTATIVE ALL ANNO HOLD			

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