

## 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 lieu of such endorsement(s).

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PRODUCER		CONTACT NAME:			
Bene-Marc, Inc. 6301 Southwest Blvd., Suite 10	1	PHONE (A/C, No, Ext): (800) 247-1734 FAX (A/C, No): (817)	738-1811		
Fort Worth, TX 76132-1063 (800) 247-1734	1	E-MAIL ADDRESS: contact@bene-marc.com			
		INSURER(S) AFFORDING COVERAGE	NAIC#		
,		INSURER A: HDI Global Specialty SE	AA-1120822		
INSURED		INSURER B: AXIS Insurance Company	37273		
Northville Baseball/Softball Ass PO Box 147	ociation	INSURER C:			
Northville, MI 48167		INSURER D :			
, , , , , , , , , , , , , , , , , , , ,		INSURER E:			
		INSURER F:	1		
COVERAGES	CERTIFICATE NUMBER: 5439-5332	20-248169 REVISION NUMBER:			
	COLORED OF MICHEANICE LICTED DELCALLI	VE BEEN JOOUED TO THE MIGHBED MAKED ABOVE FOR THE BOLL	IOV DEDICE		

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		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	Χ	<b>INCLUDES Participant Legal</b>						MED EXP (Any one person)	\$	5,000.00
		Liability							PERSONAL & ADV INJURY	\$
	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 Spec	ctato	ors Only
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
		ANY AUTO						BODILY INJURY (Per person)	\$	
		OWNED SCHEDULED AUTOS ONLY						' ' ' /	\$	
		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)							PER OTH- STATUTE ER		
			N/A					E.L. EACH ACCIDENT	\$	
							E.L. DISEASE - EA EMPLOYEE	\$		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	
В	B Excess Accident Medical				SRPO-30000-4000-0797	1/1/2023	1/1/2024	Limit 100,000.00 / Dec	ducti	ble 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 26 07/04.

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> 5439-53320-248169	CANCELLATION				
St. Pauls Ev. Luthern Church 201 Elm Street Northville, MI 48167	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
ı	AUTHORIZED REPRESENTATIVE ALL ANNOUNT HALL				