



**COMMERCIAL GENERAL LIABILITY COVERAGE PART 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.

<b>INSURANCE COMPANY:</b> Great American E&S Insurance Company <b>NAMED INSURED:</b> Outdoor Recreations Insurance Program - Risk Purchasing Group <b>CERTIFICATE HOLDER:</b> Get Some Productions <b>ADDRESS:</b> 601 South Geneva Street, Pomeroy, IA 50575 <b>POLICY PERIOD:</b> 10/26/2022 TO 10/26/2023 12:01 A.M. STANDARD TIME AT YOUR ADDRESS SHOWN.	<b>POLICY NUMBER:</b> PLE786898 <b>CERTIFICATE NUMBER:</b> CDJA95151
--	---

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	\$	300,000 Any One Premises
Medical Expense Limit	\$	5,000 Any One Person

ADDITIONAL COVERAGE OPTIONS – Coverage Applies When Checked
<input type="checkbox"/> AES3207 04/11 Additional Insured - Blanket
<input type="checkbox"/> CG2026 04/13 Additional Insured – Designated Person or Organization
<input type="checkbox"/> CG2011 04/13 Additional Insured – Mangers or Lessors of Premises
<input type="checkbox"/> CG9012 02/16 Hired Auto and Non-Owned Auto Liability

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

<b>TYPE OF BUSINESS:</b> <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Other:	
<b>PREMIUM:</b> \$150.00 <b>ORIP FEE:</b> \$47.00 <b>SURPLUS LINES TAX:</b> \$1.97 <b>STAMPING FEE:</b> \$0.00 <b>TOTAL COST:</b> \$198.97 (100% Earned/Non-Refundable)	<b>POLICY DEDUCTIBLE:</b> N/A
<b>BUSINESS DESCRIPTION:</b> Disk Jockey, Karaoke Jockey	

Mandatory Forms and Endorsement	
<input checked="" type="checkbox"/> DJ001	Commercial General Liability Coverage Part Certificate Page
<input checked="" type="checkbox"/> CG0001 04/13	Commercial General Liability Coverage Part
<input checked="" type="checkbox"/> IL0017 11/98	Common Policy Conditions
<input checked="" type="checkbox"/> ESM3005 10/15	Common Policy Conditions Amendment
<input checked="" type="checkbox"/> AES3004 05/01	Amendment – Premium Audit Condition
<input checked="" type="checkbox"/> CG9161 07/19	Risk Purchasing Group Endorsement
<input checked="" type="checkbox"/> AES3013 04/11	Deductible Liability Insurance
<input checked="" type="checkbox"/> AES3012 08/11	General Service of Suit Endorsement (Not Applicable in Delaware or Pennsylvania)
<input checked="" type="checkbox"/> IL7268 09/09	InWitness Clause
<input checked="" type="checkbox"/> CG2144 04/17	Limitation of Coverage – Designated Premises, Project or Operation
<input checked="" type="checkbox"/> IL7324 08/12	Economic and Trade Sanctions Clause
<input checked="" type="checkbox"/> CG2107 05/14	Exclusion – Access or Disclosure of Confidential or Personal Information and Data-Related Liability – Limited Bodily Injury Exception Not Included
<input checked="" type="checkbox"/> ESG3286 02/17	Drug Liability Exclusion
<input checked="" type="checkbox"/> ESG3287 02/17	Total Liquor Liability Exclusion
<input checked="" type="checkbox"/> CG8481 08/14	Exclusion – Organic Pathogens
<input checked="" type="checkbox"/> CG9029 05/16	Exclusion of Claims and Suits Alleging Infringement of Intellectual Property or Unfair Competition

<input checked="" type="checkbox"/>	CG8015 07/98	Exclusion – Abuse, Molestation, Harassment or Sexual Conduct
<input checked="" type="checkbox"/>	ESG1010 08/16	Exclusion – Aircraft Products and Grounding Liability
<input checked="" type="checkbox"/>	IL7069 03/16	Exclusion - Asbestos
<input checked="" type="checkbox"/>	CG8479 01/10	Exclusion – Assault and Battery
<input checked="" type="checkbox"/>	CG2101 12/19	Exclusion – Athletics or Sports Participants
<input checked="" type="checkbox"/>	ESG3229 06/15	Exclusion – Employers Liability
<input checked="" type="checkbox"/>	CG2147 12/07	Exclusion – Employment Related Practices
<input checked="" type="checkbox"/>	CG7794 07/98	Exclusion – Liability Arising Out of Lead
<input checked="" type="checkbox"/>	ESG1007 06/15	Exclusion – Metal, Gas, Fumes and Metal By-Product
<input checked="" type="checkbox"/>	IL0021 09/08	Exclusion – Nuclear Energy Liability Exclusion (Broad Form)
<input checked="" type="checkbox"/>	CG8366 06/05	Exclusion – Nuclear, Biological, or Chemical
<input checked="" type="checkbox"/>	ESG1001 09/13	Exclusion – Pre-Existing Damage
<input checked="" type="checkbox"/>	ESG3077 11/16	Exclusion – Professional Liability Errors and Omissions
<input checked="" type="checkbox"/>	CG8361 02/05	Exclusion – Silica or Related Dust
<input checked="" type="checkbox"/>	CG2149 09/99	Exclusion – Total Pollution
<input checked="" type="checkbox"/>	ESG1011 09/16	Exclusion – Unmanned Aircraft Personal and Advertising Injury Liability
<input checked="" type="checkbox"/>	ILSN 05/08	Surplus Lines Notification - Illinois
<input checked="" type="checkbox"/>	IL7368 04/15	Disclosure Pursuant to Terrorism Risk Insurance Act
<input checked="" type="checkbox"/>	CG2171 01/15	Exclusion of Other Acts of Terrorism Committed Outside The United States Cap on Losses from Certified Acts of Terrorism
<input checked="" type="checkbox"/>	CG2176 01/15	Exclusion – Punitive Damages Related to a Certified Act of Terrorism
<input checked="" type="checkbox"/>	AES 3020 05/01	Exclusion - Weapons
<input checked="" type="checkbox"/>	CG2153 01/96	Exclusion — Designated Ongoing Operations

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.

**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](mailto:CLAIMS@VOPINS.COM) or by letter to Insurance Canopy, PO Box 34833, North Chesterfield, VA 23234.  
**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  
 866.395.1308  
[info@Veracityins.com](mailto:info@Veracityins.com)

**ADMINISTRATOR SIGNATURE:**  




Iowa

“This policy is issued, pursuant to Iowa Code section 515.120, by a nonadmitted company in Iowa and as such is not covered by the Iowa Insurance Guaranty Association.”

