

## COMMERCIAL GENERAL LIABILITY COVERAGE PART – OCCURRENCE FORM 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:** GREAT AMERICAN ALLIANCE INSURANCE COMPANY  
**NAMED INSURED:** BEAUTY HEALTH & TRADE ALLIANCE  
**CERTIFICATE HOLDER:** VERONICA HANSON MIXED MEDIA ART BY VERONICA HANSON  
**ADDRESS:** 13953 VISTA SAGE PLACE, JAMUL, California 91935  
**POLICY PERIOD:** 08/06/2021 to 08/08/2021

**POLICY NUMBER:**  
PL3403023

**CERTIFICATE NUMBER:**  
AS161541

### LIMITS OF INSURANCE

|                                                                    |    |                          |
|--------------------------------------------------------------------|----|--------------------------|
| General Aggregate Limit (Other than Products-Completed Operations) | \$ | 2,000,000                |
| Products-Completed Operations Aggregate Limit                      | \$ | EXCLUDED                 |
| Personal and Advertising Injury Limit                              | \$ | EXCLUDED                 |
| General 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     |
| Liability Deductible                                               |    | None                     |

**FORM OF BUSINESS:** Sole Proprietor/Individual

**PREMIUM:** \$ 0  
**BHTA FEE:** \$ 39  
**TOTAL COST OF INSURANCE:** \$ 39 (The cost is 100% earned/non refundable)  
*Price includes premium and fees*

**CODE NUMBER:** 63217 **PREMIUM BASIS:** Number of Days **EXPOSURE:** 1 - 3 Consecutive Days  
**CLASSIFICATION:** Exhibitions, Art

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. PLEASE READ THE POLICY AND ALL ENDORSEMENTS.

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

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 VERACITY INSURANCE SOLUTIONS, LLC 260 SOUTH 2500 WEST SUITE 303, PLEASANT GROVE, UT 84062.

**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).

### ADMINISTRATED BY



Veracity Insurance Solutions, LLC  
260 South 2500 West Suite 303  
Pleasant Grove Utah 84062  
844.520.6991  
[info@actinsurance.com](mailto:info@actinsurance.com)

ADMINISTRATOR'S SIGNATURE:

