

Solutions, LLC



Great American Alliance Insurance Company

301 E. Fourth Street, 25 S Cincinnati, OH 45202-4201

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: JP GREENWOOD PHOTOGRAPHY

ADDRESS: 224 Calle Marina, 92672, California 92672 POLICY PERIOD: 04/26/2024 to 04/28/2024

POLICY NUMBER:

PLE957546

CERTIFICATE NUMBER:

AS287693

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: \$10.00
BHTA FEE: \$34.00
TOTAL POLICY COST: (The cost is 100% earned/non refundable) \$44.00

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 T@LAIMS@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

ADMINISTRATOR'S SIGNATURE: