STPAULS-14

ASTEEVENSON

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/18/2021

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.

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). PRODUCER License # 0757776 CONTACT Elizabeth Maddelina HUB International Insurance Services Inc. PHONE (A/C, No, Ext): (310) 568-5931 FAX (A/C, No): 600 Corporate Pointe Suite 600 E-MAIL ADDRESS Elizabeth.maddelina@hubinternational.com Culver City, CA 90230 NAIC # INSURER(S) AFFORDING COVERAGE INSURER A: Philadelphia Indemnity Insurance Company 18058 INSURED INSURER B St. Paul's INSURER C United Methodist Church 2600 Nelson Ave. INSURER D Redondo Beach, CA 90278 INSURER E INSURER F COVERAGES CERTIFICATE NUMBER: **REVISION NUMBER:** 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. A X COMMERCIAL GENERAL LIABILITY POLICY EFF POLICY EXP POLICY NUMBER LIMITS 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurre 1,000,000 CLAIMS-MADE X OCCUR X PHPK2221695 1/1/2021 1/1/2022 15,000 MED EXP (Any one person) 1,000,000 PERSONAL & ADV INJURY 3,000,000 GEN'L AGGREGATE LIMIT APPLIES PER GENERAL AGGREGATE 3,000,000 PRO-JECT POLICY PRODUCTS - COMP/OP AGG OTHER COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY ANY AUTO BODILY INJURY (Per person) OWNED AUTOS ONLY SCHEDULED AUTOS BODILY INJURY (Per accident) \$
PROPERTY DAMAGE
(Per accident) \$ HIRED AUTOS ONLY NON-OWNED AUTOS ONLY UMBRELLA LIAB OCCUR EACH OCCURRENCE CLAIMS-MADE **EXCESS LIAB** AGGREGATE RETENTION S WORKERS COMPENSATION AND EMPLOYERS' LIABILITY STATUTE ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The City of Redondo Beach, its agents, officers, elected and appointed officials, employees & volunteers are additional insured on the general liability policy, per form #PI-RO-012 (10/16), with respects to liability arising out of work or operations performed by on behalf of the named insured for "Project Needs CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE ACCORDANCE WITH THE POLICY PROVISIONS. City of Redondo Beach Recreation & Community Service Dept

ACORD 25 (2016/03)

1922 Artesia Blvd

Redondo Beach, CA 90278

ACORD

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AUTHORIZED REPRESENTATIVE

Detro Dene