DATE (MM/ DD/ YYYY)

ACORD

1175 South Main St, #10 Plantsville, CT 06479

CERTIFICATE OF LIABILITY INSURANCE

03/12/2018

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 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). CONTACT NAME: Samantha Freeman PRODUCER SADLER & COMPANY, INC. PHONE (A/C. No. Ext): 800-622-7370 FAX (A/ C, No): 803-256-4017 P.O. BOX 5866 E- MAIL ADDRESS: insurance@sadlerco.com COLUMBIA, SOUTH CAROLINA 29250-5866 PRODUCER CUSTOMER ID# INSURED NAIC# **INSURER(S) AFFORDING COVERAGE** Men's Senior Baseball League dba Men's Adult Baseball League INSURER A: National Casualty CT North Men's Senior Baseball League CNMSBL INSURER B: Greg Schienda

INSURER C:

INSURER D

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 DEFENDED BY A PURPLY OF A PURPLY OF THE POLICIES OF SUCH POLICIES. MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/ DD/ YYYY)	POLICY EXP (MM/ DD/ YYYY)	LIMITS	
Α	GENERAL LIABILITY	Х					EACH OCCURRENCE	\$2,000,000
	COMMERCIAL GENERAL LIABILITY CLAIMS MADE OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000
	CLAIMS MADEOCCOR						PREMISES MEDICAL PAYMENTS	\$5,000
	<u> </u>			KB 0000007400700	12:01AM ET	12:01AM ET	PERSONAL & ADV INJURY	\$2,000,000
	LJ			KRO0000007180700	03/20/2018	03/20/2019	GENERAL AGGREGATE	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES						PRODUCTS- COMP/ OP AGG	\$2,000,000
	PER: ☑POLICY ☐ PROJECT ☐ LOC						LEGAL LIABILITY TO PARTICIPANTS (see conditions)	\$1,000,000
Α	AUTOMOBILE LIABILITY NAME AUTO						COMBINED SINGLE LIMIT (Ea Accident)	
	ALL OWNED AUTOS						BODILY INJURY (Per person)	
	SCHEDULED AUTOS						BODILY INJURY (Per accident)	
	☐HIRED AUTOS						PROPERTY DAMAGE (Per accident)	
	□NON-OWNED AUTOS							
	□ NOT PROVIDED WHILE IN HAWAII							
	☐UMBRELLA LIAB ☐OCCUR						EACH OCCURRENCE	
	EXCESS LIAB CLAIMS- MADE						AGGREGATE	
	☐ DEDUCTIBLE ☐ RETENTION							
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS	
	AND EMPLOYERS LIABILITY ANY PROPRIETOR /						OTHER	
	PARTNER / EXECUTIVE Y/ N OFFICER / MEMBER			N/A			E.L. EACH ACCIDENT	
	EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF						E.L. DISEASE - EA EOMPLOYEE	
	OPERATIONS below						E.L. DISEASE - POLICY LIMIT	
В	EXCESS MEDICAL						MEDICAL	
							DEDUCTIBLE	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Covered Sport: Member Baseball Team or League - 16 Team(s)
Team Names: Portland Pirates, Newington/ Rocky Hill Caps, Middletown Mustang, East Haven Jorels, Hebron Nor- Easters, East Lyme Warriors, Colchester Thunder, Brewers, Southington GAtors, Newington Dodgers, Marlborough A's, Kennsington Cannons, Hartford/ Bicomfield Dream Chasers, Granby Cubs, Canton Devil Rays, New Haven Cardinals

Legal Liability to Participants Policy Conditions: Waiver Release is required. If no waiver is produced-\$5,000 Deductible Applies. The certificate holder is added as an additional insured, but only with respect to the liability arising out of the operations of the insured above.

CERTIFICATE HOLDER RELATIONSHIP:

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

North Field **Woodruff Street** Southington, CT 06489

Property Owner/Lessor

AUTHORIZED REPRESENTATIVE

Coverage is only extended to U.S. events and activities

** NOTICE TO TEXAS INSUREDS: The Insurer for the purchasing group may not be subject to all the insurance laws and regulations of the State of Texas.

ACORD 25 (2009/09)

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ENDORSEMENT NO. 0000

ATTACHED TO AND FORMING A PART OF POLICY NUMBER	ENDORSEMENT EFFECTIVE DATE (12:01 A.M. STANDARD TIME)	NAMED INSURED	AGENT NO.
KRO000007180700	03/12/2018	CT North Men's Senior Baseball League CNMSBL	

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSUREDS OWNERS AND/ OR LESSORS OF PREMISES, SPONSORS OR CO-PROMOTERS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

The policy is amended to include as an additional Insured any person or organization of the types indicated by an "X" in any boxes shown below, but only with respect to liability arising out of your operations:

[X] Owners and/ or lessors of the premises leased, rented, or

- loaned to you, subject to the following additional exdusions:

 a. This insurance applies only to an "occurrence" which takes place while you are a tenant in the premises;
 - b. This insurance does not apply to "bodily injury" or "property damage" resulting from structural alterations, new construction or demolition operations performed by or on behalf of the owner and/ or lessor of the premises;
 - c. This insurance does not apply to liability of the owners and/ or lessors for "bodily injury" or "property damage" arising out of any design defect or structural maintenance of the premises or loss caused by a premises defect.

With respect to any additional insured included under this policy, this insurance does not apply to any negligence of such additional insured.

- [X] Sponsors
- [X] Co- Promoters
- [X] Any individual person(s) or organization(s) listed below CÓACHES, OFFICIALS AND VOLUNTEERS WHILE ACTING WITHIN THE SCOPE OF THEIR DUTIES FOR THE INSURED.

KR-GL-56 (4-07)