Client#: 31137 BERMEAJA

 $ACORD_{\cdot\cdot\cdot}$ 

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/04/2023

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 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 any rights to the certificate holder in lieu of such endorsement(s).

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PRODUCER	CONTACT Esther Garcia					
USI Insurance Services, LLC-CL	PHONE (A/C, No, Ext): 786-454-2015 FAX (A/C, No):					
2400 East Commercial Blvd.	E-MAIL ADDRESS: Esther.Garcia@usi.com					
Suite 600	INSURER(S) AFFORDING COVERAGE	NAIC #				
Fort Lauderdale, FL 33308	<b>INSURER A: Hartford Casualty Insurance Company</b>	29424				
INSURED	INSURER B : Hartford - WC Multiple Issuing Cos	00914				
Bermello, Ajamil & Partners, Inc. 4711 S LeJeune Road	INSURER C: Continental Casualty Company	20443				
	INSURER D : Hartford Fire Insurance Company	19682				
Coral Gables, FL 33146-5437	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.

INSR LTR	TYPE OF INSURANCE	ADDL SUE	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
Α	X COMMERCIAL GENERAL LIABILITY	X	21UUNOL5437	11/11/2022	11/11/2023	EACH OCCURRENCE	\$1,000,000	
	CLAIMS-MADE X OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$300,000	
						MED EXP (Any one person)	\$10,000	
						PERSONAL & ADV INJURY	\$1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$2,000,000	
	POLICY X PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$2,000,000	
	OTHER:						\$	
D	AUTOMOBILE LIABILITY		21UENOL5438	11/11/2022	11/11/2023	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000	
	X ANY AUTO					BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS ONLY					BODILY INJURY (Per accident)	\$	
	X HIRED X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$	
						, ,	\$	
Α	X UMBRELLA LIAB X OCCUR		21XHUOL5439	11/11/2022	11/11/2023	EACH OCCURRENCE	\$10,000,000	
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$10,000,000	
	DED X RETENTION \$10000						\$	
В	WORKERS COMPENSATION		21WBOL6H44	11/11/2022	11/11/2023	X PER OTH-		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE					E.L. EACH ACCIDENT	\$1,000,000	
	OFFICER/MEMBER EXCLUDED? N (Mandatory in NH)	N/A				E.L. DISEASE - EA EMPLOYEE	. , ,	
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$1,000,000	
С	Professional		AEH288262231	11/11/2022	11/11/2023			
	Liabilty		Retro Date			\$10,000,000 Aggregate		
	Claims MAde		11/18/2006			\$200,000 Deductible	•	
DEC	DESCRIPTION OF OPENATIONS / LOCATIONS / VEHICLES (ACORD 101 Additional Paragras Schoolule, may be attached if many appear in required)							

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: Avant Garde Academy of Broward, City of Hollywood - Hollywood Boulevard Landscape & Irrigation, Work Authorization No.1 - Continuing Services Contract DS 18-0/14 with the City of Hollywood, Florida
City of Hollywood, is an additional insured as respects to General Liability when required by written agreement/contract

CERTIFICATE HOLDER	CANCELLATION

City of Hollywood - Department of Design & Construction Management 2207 Raleigh Street Hollywood, FL 33020 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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