



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/01/2023

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.

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.

PRODUCER: LOUIS MORRISON, LOUIS MORRISON C & C CONSULTANTS, PO BOX 701340, SAINT CLOUD, FL 34770-1340
CONTACT NAME: LOU MORRISON, PHONE: 888-494-9844, FAX: 407-809-5283, E-MAIL ADDRESS: HALMORRISON@HOTMAIL.COM
INSURER(S) AFFORDING COVERAGE: INSURER A: CRUM & FORSTER SPECIALTY INS. CO. (NAIC # 44520), INSURER B: OWNERS INSURANCE COMPANY (NAIC # 32700)

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.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liability, Workers Compensation, and Contractors Pollution Liability.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
CITY OF HOLLYWOOD IS LISTED AS AN ADDITIONAL INSURED WITH REGARDS TO GENERAL LIABILITY AND AUTO LIABILITY AS RESPECTS TO WORK PERFORMED BY THE INSURED.

CERTIFICATE HOLDER: CITY OF HOLLYWOOD, P.O. BOX 229045, HOLLYWOOD, FL 33022
CANCELLATION: 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: Louis Morrison

From: [Certificate of Insurance](#)
To: [Daniela Behm](#); [Certificate of Insurance](#)
Subject: RE: Water Treatment and Control COI
Date: Monday, October 23, 2023 4:03:16 PM
Attachments: [WTC COH COI Expires 3.2024.pdf](#)
[image001.png](#)

Hello,

The COI is acceptable.

Thanks,

Stacy

From: Daniela Behm <DBEHM@hollywoodfl.org>
Sent: Monday, October 23, 2023 3:38 PM
To: Certificate of Insurance <COI@hollywoodfl.org>
Subject: Water Treatment and Control COI

Good afternoon,

Please see attached COI for your review and approval.

Thank you,

Daniela "Dani" Behm
Administrative Assistant I
Public Utilities Administration
Phone: 954-967-4455 Ext: 5641

