

9/4/2019

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

this certificate does not confer rights to the certificate holder in lieu of s	uch endorsement(s).						
PRODUCER McGee & Thielen Insurance Brokers, Inc.	CONTACT NAME:						
3840 Rosin Court, Suite 245	PHONE (A/C, No, Ext): 916-646-1919 FAX (A/C, No): 91	6-646-0995					
Sacramento, CA 95834	E-MAIL ADDRESS:						
	INSURER(S) AFFORDING COVERAGE	NAIC#					
www.mcgeethielen.com 0633187	INSURER A: Financial Pacific Insurance Company	31453					
INSURED	INSURER B: AmGUARD Insurance Company 42390						
Elegant Outdoor Lighting Landscaping, Inc. 3941 Park Drive, Suite 20469	INSURER C:						
El Dorado Hills CA 95762	INSURER D:						
	INSURER E :						
	INSURER F:						
COVERAGES CERTIFICATE NUMBER: 50948703	REVISION NUMBER:						
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAINDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORD	OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO V	VHICH THIS					

	OLC	CICILO / IND CONDITIONS OF COOL		-	EINITO CHOWN WINCE TIME BEETIN				
INSR LTR		TYPE OF INSURANCE	ADDL INSD		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s
Α	1	COMMERCIAL GENERAL LIABILITY			88326101	10/5/2019	10/5/2020	EACH OCCURRENCE	\$1,000,000
		CLAIMS-MADE ✓ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
								MED EXP (Any one person)	\$5,000
								PERSONAL & ADV INJURY	\$1,000,000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
	✓	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
		OTHER:							\$
В	AUT	OMOBILE LIABILITY			ELAU968914	10/25/2018	10/25/2019	COMBINED SINGLE LIMIT (Ea accident)	\$500,000
		ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	\$
	/	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
									\$
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
		DED RETENTION \$							\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
		PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$
	(Mar	datory in NH)	,					E.L. DISEASE - EA EMPLOYEE	\$
	If yes	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
DESC	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)								

CERTIFICATE HOLDER	CANCELLATION
Del Paso Country Club Attn: Bob Kunz CA 95762	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

© 1988-2015 ACORD CORPORATION. All rights reserved.

Evidence of coverage



DATE (MM/DD/YYYY) 9/4/2019

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 cortificate does not confor rights to the cortificate holder in liqu of such andersement(s)

tills certificate does not comer rights to the certificate holder in fied of st	ich endorsement(s).	
PRODUCER McGee & Thielen Insurance Brokers, Inc.	CONTACT NAME:	
3840 Rosin Court, Suite 245	PHONE (A/C, No, Ext): 916-646-1919 FAX (A/C, No): 91	6-646-0995
Sacramento, CA 95834	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC#
www.mcgeethielen.com 0633187	INSURER A: Financial Pacific Insurance Company	31453
INSURED	INSURER B: AmGUARD Insurance Company	42390
Elegant Outdoor Lighting Landscaping, Inc. 3941 Park Drive, Suite 20469	INSURER C:	
El Dorado Hills CA 95762	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: 50948704 **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s
Α	/	COMMERCIAL GENERAL LIABILITY			88326101	10/5/2019	10/5/2020	EACH OCCURRENCE	\$1,000,000
		CLAIMS-MADE ✓ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
								MED EXP (Any one person)	\$5,000
								PERSONAL & ADV INJURY	\$1,000,000
	GEN	N'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
	1	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
		OTHER:							\$
В	AUT	OMOBILE LIABILITY			ELAU968914	10/25/2018	10/25/2019	COMBINED SINGLE LIMIT (Ea accident)	\$500,000
		ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED AUTOS ONLY SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	\	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
									\$
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
		DED RETENTION\$							\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$
	(Man	ndatory in NH)	,,					E.L. DISEASE - EA EMPLOYEE	\$
	If yes	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
DESC	RIPT	TION OF OPERATIONS / LOCATIONS / VEHICI	LES (A	CORD	101, Additional Remarks Schedule, may I	e attached if mor	e space is require	ed)	

CERTIFICATE HOLDER

CANCELLATION

Enterprise Holdings, Inc., its subsidiary and affiliated companies, EAN Holdings, LLC and EAN Trust 150 N. Sunrise Ave Roseville CA 95661

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

Charlotte Brown © 1988-2015 ACORD CORPORATION. All rights reserved.



9/4/2019

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

this certificate does not confer ri	ights to the certificate holder in lieu of si	ucn endorsemer	nt(s).				
PRODUCER McGee & Thielen Ins	urance Brokers, Inc.	CONTACT NAME:					
3840 Rosin Court, St	uite 245	PHONE (A/C, No, Ext):	916-646-1919	FAX (A/C, No):	916-646-0995		
Sacramento, CA 958	34	E-MAIL ADDRESS:					
			INSURER(S) AFFORDING COVERAG	SE .	NAIC#		
www.mcgeethielen.com	0633187	INSURER A: Fina	ncial Pacific Insurance Compa	any	31453		
INSURED	ndonning lan	INSURER B : AmC	42390				
Elegant Outdoor Lighting La 3941 Park Drive, Suite 2046	nascaping, inc. 9	INSURER C:					
El Dorado Hills CA 95762		INSURER D:					
		INSURER E :					
		INSURER F:					
001/504.050	A		DE1//0/01/01				

COVERAGES CERTIFICATE NUMBER: 50948705 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 INSD			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
Α	1	COMMERCIAL GENERAL LIABILITY			88326101	10/5/2019	10/5/2020	EACH OCCURRENCE	\$1,000,000
		CLAIMS-MADE ✓ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000
								MED EXP (Any one person)	\$5,000
								PERSONAL & ADV INJURY	\$1,000,000
	GEI	N'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
	1	POLICY PRO- LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
		OTHER:							\$
В	AUT	TOMOBILE LIABILITY			ELAU968914	10/25/2018	10/25/2019	COMBINED SINGLE LIMIT (Ea accident)	\$500,000
		ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	1	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
									\$
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
		DED RETENTION \$							\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
		PROPRIETOR/PARTNER/EXECUTIVE ICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$
	(Mar	ndatory in NH)						E.L. DISEASE - EA EMPLOYEE	\$
	DES	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
DES	CRIPT	TION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	CORD	101, Additional Remarks Schedule, may b	e attached if mor	e space is require	ed)	
Evi	iden	ce of coverage							
		-							

CERTIFICATE HOLDER	CANCELLATION

Enterprise Holdings, Inc., its subsidiary and affiliated companies, EAN Holdings, LLC and EAN Trust 150 N. Sunrise Avenue Roseville CA 95661

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

Charlotte Brown

© 1988-2015 ACORD CORPORATION. All rights reserved.



DATE (MM/DD/YYYY) 9/4/2019

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 confe	r rights to the certificate holder in lieu of s	ucn enaorseme	ent(S).			
PRODUCER McGee & Thielen I	nsurance Brokers, Inc.	CONTACT NAME:				
3840 Rosin Court, Sacramento, CA 9	Suite 245	PHONE (A/C, No, Ext):	916-646-1919	FAX (A/C, No):	916-646-0995	
Sacramento, CA 9	0034	E-MAIL ADDRESS:				
			INSURER(S) AFFORDING COVER	RAGE	NAIC#	
www.mcgeethielen.com	0633187	INSURER A: Fin	ancial Pacific Insurance Con	npany	31453	
INSURED	andononing Inc	INSURER B: Am	42390			
Elegant Outdoor Lighting I 3941 Park Drive, Suite 20	_andscaping, inc. 469	INSURER C:				
El Dorado Hills CA 95762		INSURER D:				
		INSURER E:				
		INSURER F:				
COVERAGES	CERTIFICATE NUMBER: 50049706		REVISION	J NIIMRER:		

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	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	·s
Α	✓	COMMERCIAL GENERAL LIABILITY			88326101	10/5/2019	10/5/2020	EACH OCCURRENCE DAMAGE TO RENTED	\$1,000,000
		CLAIMS-MADE ✓ OCCUR						PREMISES (Ea occurrence) MED EXP (Any one person)	\$100,000 \$5,000
			-					` , ' , '	
	051		-					PERSONAL & ADV INJURY	\$1,000,000 \$2,000,000
	J GEI	POLICY PRO- POLICY PRO- LOC						GENERAL AGGREGATE	*
	•							PRODUCTS - COMP/OP AGG	\$2,000,000
В	ΔΙΙ	OTHER: TOMOBILE LIABILITY			ELAU968914	10/25/2018	10/25/2019	COMBINED SINGLE LIMIT	
	7.0	ANY AUTO			22/10/00/01/4	10/20/2010	10/20/2013	(Ea accident) BODILY INJURY (Per person)	\$500,000 \$
		OWNED SCHEDULED						BODILY INJURY (Per accident)	
		AUTOS ONLY AUTOS NON-OWNED						PROPERTY DAMAGE	\$
	/	AUTOS ONLY AUTOS ONLY						(Per accident)	\$
		UMBRELLA LIAB OCCUP							
		- OCCUR						EACH OCCURRENCE	\$
		CLAIWS-IW	DE					AGGREGATE	\$
-	WO	DED RETENTION \$						PER OTH- STATUTE ER	\$
	AND	EMPLOYERS' LIABILITY	N					<u> </u>	
	OFF	PROPRIETOR/PARTNER/EXECUTIVE ICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$
	If ve	ndatory in NH) s, describe under	_					E.L. DISEASE - EA EMPLOYEE	
-	DÉS	CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
DESC	RIP	TION OF OPERATIONS / LOCATIONS / VE	IICLES (ACORE	0 101, Additional Remarks Schedule, may b	e attached if mor	e space is require	ed)	
Evi	den	ce of coverage							

CERTIFICATE HOLDER	CANCELLATION
Evidence of coverage with respects to Scott Sissom dba Elegant Outdoor Lighting 3941 Park Drive, Suite 20469	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
El Dorado Hills CA 95762	Charlotte Brown

© 1988-2015 ACORD CORPORATION. All rights reserved.



DATE (MM/DD/YYYY) 9/4/2019

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 rights to the certificate holder in fieu of such endorsement(s).						
PRODUCER McGee & Thielen Ins	surance Brokers, Inc.	CONTACT NAME:				
3840 Rosin Court, Suite 245		PHONE (A/C, No, Ext):	916-646-1919	FAX (A/C, No):	916-646-0995	
Sacramento, CA 958	534	E-MAIL ADDRESS:				
			INSURER(S) AFFORDING COVERAG	SE .	NAIC#	
www.mcgeethielen.com	0633187	INSURER A: Fina	ancial Pacific Insurance Compa	any	31453	
INSURED		INSURER B : AmC	42390			
Elegant Outdoor Lighting Landscaping, Inc. 3941 Park Drive, Suite 20469		INSURER C:				
El Dorado Hills CA 95762		INSURER D:				
		INSURER E :				
		INSURER F:				
001/504.050			DEV//01011			

COVERAGES CERTIFICATE NUMBER: 50948707 **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 SUBR		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
Α	/	COMMERCIAL GENERAL LIABILITY			88326101	10/5/2019	10/5/2020	EACH OCCURRENCE	\$1,000,000
		CLAIMS-MADE ✓ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
								MED EXP (Any one person)	\$5,000
								PERSONAL & ADV INJURY	\$1,000,000
	GEN	L'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
	✓	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
		OTHER:							\$
В	AUT	OMOBILE LIABILITY			ELAU968914	10/25/2018	10/25/2019	COMBINED SINGLE LIMIT (Ea accident)	\$500,000
		ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	\$
	/	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
								,	\$
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
		DED RETENTION \$							\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A					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) Fixed page of coverage with respect to 210 Neterns Street. Follows: CA								

CERTIFICATE HOLDER CA	
-----------------------	--

Natoma Village, LLC Attn: Mary Carson 152 Kettle Rock Court Folsom CA 95630

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

Charlotte Brown

© 1988-2015 ACORD CORPORATION. All rights reserved.