

CERTIFICATE OF LIABILITY INSURANCE

1/03/2020

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).

Frazier Insurance Agency, Inc. P.O. Box 1250 Midlothian, VA 23113-1250		CONTACT Frazier Insurance Agency, Inc.										
		PHONE (A/C, No Ext) (804) 754-7610 E-MAIL ADDRESS ifrazier@frazierinsurance.com INSURER(S) AFFORDING COVERAGE NA INSURER A Aegis Security Insurance Company										
						INSURED Sports and Special Even	Sports and Special Event Risk Purchasing Group, Inc.	INSURERB				
						Krewe of Mu	llet Mates	INSURERD INSURERD				
513 3rd Stree												
Fairhope, AL	Fairhope, AL 36532	INSURERE										
		INSURERF:										
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.

TYPE OF INSURANCE	ADDL INSR			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
GENERAL LIABILITY						GENERAL AGGREGATE	\$ 2,000,000.00
X COMMERCIAL GENERAL LIABILITY			<u> </u>	_		PRODUCTS - COMP/OP AGG	\$ 2,000,000.00
CLAIMS-MADE X OCCUR					PERSONAL & ADV INJURY	\$ 1,000.000.00	
				02/21/2020	02/23/2020	EACH OCCURRENCE	\$ 1,000.000.00
			12:01 AM	DAMAGE TO RENTED PREMISES	\$ 300,000.0		
ENL AGGREGATE LIMIT APPLIES PER:						MED EXP (Any one person)	\$ 5,000.00
X POLICY PRO- JECT LOC							\$
AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	s
ANYAUTO						BODILY INJURY (Per person)	\$
ALL OWNED SCHEDULED AUTOS AUTOS						BODILY INJURY (Per accident)	\$
HIRED AUTO NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
							\$
UMBRELLALIAB OCCUR						EACH OCCURRENCE	is .
EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
DED RETENTION S							S
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DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) POLICY DEDUCTIBLE \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

CERTIFICATEHOLDER	CANCELLATION			
Krewe of Mullet Mates 513 3 rd Street	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
Fairhope, AL 36532	AUTHORIZED REPRESENTATIVE			
	John W. Frazier			



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DATE (MM/DD/YYYY) 1/03/2020

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					(A/C, No, Ext): (804) 754-7610 FAX (A/C, No) (804) 7					
					ADDRESS ifrazier@frazierinsurance.com					
					INSURER(S) AFFORDING COVERAGE					
				INSURERA Aegis Security Insurance Company						
INSL	JRED Sports and Special Event Risk Purchasii	na Group. Inc.		INSUR						
					INSURERC					
	Krewe of Mullet Mates 513 3rd Street	S		INSUR						
	Fairhope, AL 36532			INSURERE						
				INSUR						
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CE	DICATED NOTWITHSTANDING ANY F ERTIFICATE MAY BE ISSUED OR MA KCLUSIONS AND CONDITIONS OF SUCI	REQUIREMENT, T AY PERTAIN, THE	ERM OR CONDITION OF INSURANCE AFFORDS	F ANY C	ONTRACT OF	DESCRIBED	DOUMENT WITH RESPECT	TO WHICH THIS		
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	ANY AUTO ALL OWNED SCHEDULED						BODILY INJURY (Per person)	\$		
	AUTOS AUTOS						BODILY INJURY (Per accident) PROPERTY DAMAGE	\$		
	HIRED AUTO NON-OWNED						(Per accident)	\$		
	UMBRELLALIAB OCCUR	+					E LOUI DAGUEDE LOS			
	UMBRELLALIAB OCCUR EXCESS LIAB CLAIMS-MADE						EACH OCCURRENCE AGGREGATE	\$		
	DED RETENTION \$	+					THOUSE OF THE	\$		
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	RTIFICATEHOLDER			- Auto-Santana	LLATION					
-	A STATE OF SECTION AND A SECTION ASSESSMENT A			0						
Baldwin County Commission 322 Courthouse Square Bay Minette, AL 36507				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						

John W. Frazier