

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/10/2023

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

PRODUCER					
Chappell Insurance		CONTACT NAME:	Daryl Chappell		
4335 Cox Rd, Ste 4335 Glen Allen, VA, 23060		PHONE (A/C, No. Ext):	804-733-2020	FAX 804-59 (A/C, No):	91-1603
		E-MAIL support@chappellinsurance.com			
INSURED			INSURER(S) AFFORDING COV	/ERAGE	NAIC#
Lakewood Junior Baseball Association 1305 Brentwood St		INSURER A: Nationwide Mutual Insurance Company			23787
Lakewood, CO 80214		INSURER B:			
		INSURER C:			
(2)Teams in Lakewood Junior Baseball Association group		INSURER D:			
		INSURER E:			
		INSURER F:			
COVERAGES	CERTIFICATE NUMBER:	RPG-BB-	11-001019	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 ADDLSUBR POLICY FEE LIMITS POLICY NUMBER TYPE OF INSURANCE (MM/DD/YYYY (MM/DD/YYYY) LTR INSD WVD COMMERCIAL GENERAL LIABILITY **EACH OCCURRENCE** \$2,000,000 CLAIMS-MADE **OCCUR** х \$1,000,000 DAMAGE TO RENTED

PREMISES (Ea occurrence) Χ PLL - \$2,000,000 MED EXP (Any one person) RPG319983-00 01/01/2023 01/01/2024 \$2,000,000 PERSONAL & ADV INJURY 12:01 AM 12:01 AM GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE \$5,000,000 Χ POLICY PRODUCTS-COMP/OP AGG **PROJECT** LOC \$2,000,000 OTHER **Participant Legal Liability** \$2,000,000 EACH OCCURRENCE UMBRELLA LIAB OCCUR **EXCESS LIAB** CLAIMS-MADE AGGREGATE RPG319983-00 01/01/2023 01/01/2024 EXCESS MEDICAL \$100,000 PARTICIPANT ACCIDENT 12:01 AM 12:01 AM DEDUCTIBLE

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Coverage includes amateur play and practice in the insured sport for Lakewood Junior Baseball Association RPG-BB-11-001019. The certificate holder is named as an additional insured but only with respect to the operations of the named insured. Sport Insured: Baseball

Coverage Effective From 02:00 PM on 01/04/2023 TO 01/01/2024

CERTIFICATE HOLDER	CANCELLATION			
CABA 6657 W Ottawa Ave Suite B-4 Littleton, CO 80128	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
Entiretori, 00 00 120	AUTHORIZEDREPRESENTATIVE			
Certificate Number: RPG-BB-11-001019	Scott humbered			
Certificate Number: ICF G-DB-11-001019				