



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/22/2024

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).

<b>PRODUCER</b> <b>Chappell Insurance</b> <b>4335 Cox Rd Ste 4335</b> <b>Glen Allen, VA, 23060</b>	<b>CONTACT NAME:</b> Daryl Chappell <b>PHONE (A/C, No. Ext):</b> 804-733-2020 <b>FAX (A/C, No):</b> 804-591-1603 <b>E-MAIL ADDRESS:</b> support@chappellinsurance.com																					
<b>INSURED</b> <b>Lakewood Junior Baseball Association</b> <b>PO Box 151127</b> <b>Lakewood, CO 80215</b>  <b>(2)Teams in Lakewood Junior Baseball Association group</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A:</td> <td>SiriusPoint America Insurance Company</td> <td>38776</td> </tr> <tr> <td>INSURER B:</td> <td>Axis Insurance Company</td> <td>37273</td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	SiriusPoint America Insurance Company	38776	INSURER B:	Axis Insurance Company	37273	INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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COVERAGES      CERTIFICATE NUMBER: **NS-BB-11-002717**      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)	LIMITS	
<b>A</b>	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			<b>PLH01GL00000691</b>	01/01/2024 12:01 AM	01/01/2025 12:01 AM	EACH OCCURRENCE	<b>\$ 2,000,000</b>
			DAMAGE TO RENTED PREMISES (Ea occurrence)				<b>\$ 1,000,000</b>	
			MED EXP (Any one person)				\$	
			PERSONAL & ADV INJURY				<b>\$ 1,000,000</b>	
			GENERAL AGGREGATE				<b>\$ 5,000,000</b>	
			PRODUCTS-COMP/OP AGG				<b>\$ 2,000,000</b>	
			<b>Participant Legal Liability</b>				<b>\$ 1,000,000</b>	
			EACH OCCURRENCE				\$	
			AGGREGATE				\$	
	UMBRELLA LIAB      OCCUR						\$	
	EXCESS LIAB      CLAIMS-MADE						\$	
	DED      RETENTION						\$	
<b>B</b>	PARTICIPANT ACCIDENT			<b>SRP185328-00</b>	01/01/2024 12:01 AM	01/01/2025 12:01 AM	EXCESS MEDICAL	<b>\$ 100,000</b>
							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 NS-BB-11-002717. The certificate holder is named as an additional insured but only with respect to the operations of the named insured. Sport Insured: Baseball. Age Group: 13-15.

**Coverage Effective From 06:45 PM on 02/22/2024 TO 01/01/2025**

<b>CERTIFICATE HOLDER</b>  <b>GOLD CROWN FOUNDATION COCA COLA</b> <b>ALLSTAR PARK, 200 S HARLAN</b> <b>LAKWOOD, CO 80226</b>  <b>Certificate Number: NS-BB-11-002717</b>	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  <b>AUTHORIZED REPRESENTATIVE</b>  
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ACORD 25 (2016/03)

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Notice to Texas Insureds: The insurer for the purchasing group may not be covered by an insurance insolvency guarantee fund or similar mechanism and the insurer of the group is not subject to all the insurance laws and regulations of this state.