





# **CERTIFICATE OF INSURANCE & EAC POLICY**

## **Certificate of Insurance**

A requirement of exhibiting at Coffee Fest Chicago 2022 is for ALL exhibitors to carry liability insurance throughout the Exhibition. The deadline for submitting the Certificate indicating adequate insurance coverage is June 10th, 2022. Even if Exhibitor hires an EAC, Exhibitor still must supply its own Certificate of Liability Insurance. ALL EAC's must submit an application form with a certificate of insurance prior to deadline to be approved by show management. Exhibitor's insurance carrier must issue such Certificate of Liability Insurance. A sample insurance form can be found on page 3 of this document.

To ensure that the Certificate of Liability Insurance has the correct information required, please make sure your certificate includes the following information.

**AMOUNT SUGGESTED: One (1) Million Dollars** Under the Certificate Holder, please include: Clarion Events, Inc. / Coffee Fest Chicago 2022 6 Research Drive, Shelton, CT 06484

Under **Description of Operations**, please include: All activities related to Coffee Fest Chicago 2022, June 24-25, 2022 **Navy Pier** Chicago, Illinois USA

Complete Certificates of Liability Insurance must be uploaded to the exhibitor portal. Certificates of Liability Insurance will not be accepted via email or mail. Please click here to access your exhibitor portal. Your company password to access the portal can be found in your confirmation letter. Please contact your Exhibit Services Manager at Renata.Gramp@clarionevents.com with any questions.

If you do not have insurance, or you would rather not use your own insurance, (similar to when you rent a car – so that claims would not be filed against your policy), we have set up a program with Rainprotection Insurance through which, you can purchase compliant insurance instantly online for only \$84. Please <u>click here</u> for more information.

**Exhibitor Appointed Contractors (EAC)** An Exhibitor Appointed Contractor (EAC) is a company (other than the official service contractor listed in the Exhibitor Manual) that provides a service (for example, display and installation/dismantling of a booth) at Exhibitor's request and needs access to Exhibitor's booth during the installation and/or dismantling period. If you hire an EAC, you must complete and return the EAC form in exhibitor manual. The EAC will also have to provide a Certificate of Liability Insurance as described above.

### **SAMPLE**

#### DATE (MM/DD/YY) CERTIFICATE OF INSURANCE THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. This YOUR INSURANCE COMPANY CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. NAME/PHONE NUMBER OF CONTACT PERSON COMPANIES AFFORDING COVERAGE COMPANY CODE SUB-CODE COMPANY В **SAMPLE** INSURED LETTER COMPANY С LETTER YOUR COMPANY NAME AND ADDRESS D LETTER COMPANY Ε LETTER COVERAGES

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. THIS 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.

INST LTR	TYPE OF INSURANCE	POLICY NUMBER		POLICY EXPIRATION DATE(MM/DD/YY)	ALL LIMITS IN THOUSANDS		
	GENERAL LIABILITY				GENERAL AGO	GREGATE	\$1,000
	X COMMERCIAL GENERAL LIAB	BILITY			PRODUCTS-C	OM-OPS AGGREGA	TE \$1,000
	CLAIMS MADE X OCCUR.	SAMPLE	YOUR EFFECTIVE DATES		PERSONAL & ADVERTISING INJURY		RY \$1,000
	OWNERS' & CONTRACTORS'	VNERS' & CONTRACTORS' PROT.			EACH OCCUR	RENCE	\$1,000
					FIRE & DAMAG	GE (Any one fire)	\$50
					MEDICAL EXP	ENSE (Any one pers	on) \$5
	AUTOMOBILE LIABILITY				COMBINED		
	ANY AUTO				SINGLE	\$1,000	
	X ALL OWNED AUTOS				LIMIT		
	SCHEDULED AUTOS				BODILY INJURY	\$	
	X HIRED AUTOS	SAMPLE			(Per person)		
	NON-OWNED AUTOS				BODILY		
	GARAGE LIABILITY				INJURY (Per accident)	\$	
	GARAGE LIABILITY				PROPERTY	Ф	
					DAMAGE	\$	
	EXCESS LIABILITY					EACH	AGGREGATE
	UMBRELLA FORM					OCCURRENCE \$	\$
	OTHER THAN UMBRELLA FOR	RM				Φ	Φ
	X WORKER'S COMPENSATI	ON			STATUTORY		
	AND	SAMPLE			\$ 1,000	(EACH ACCIDENT	_)
	EMPLOYER'S LIABILITY				\$	(DISEASE- POLICY LIMIT)	
					\$	(DISEASE - EACH	EMPLOYEE))
	OTHER						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / RESTRICTIONS / SPECIAL ITEMS ADDITIONAL INSURED: (NAME OF EVENT) OCCURRING IN (YEAR).

SMG, SPORTS AND EXHIBITION AUTHORITY OF PITTSBURGH AND ALLEGHENY COUNTY, AND COMMONWEALTH OF PA

### **CERTIFICATE HOLDER**

### **CANCELLATION**

The Event Name	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE T EXPIRATION DATE THEROF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEF BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OR ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATI				
Shelton, CT 06484	AUTHORIZED REPRESENTATIVE				