

DISTRIBUTECH

CERTIFICATE OF INSURANCE & EAC POLICY

Certificate of Insurance

A **requirement** of exhibiting at **DISTRIBUTECH 2025** is for **ALL** exhibitors to carry liability insurance throughout the Event. The deadline for submitting the Certificate indicating adequate insurance coverage is **February 24th, 2025**. Even if an exhibitor hires an EAC, exhibitors still must supply its own Certificate of Liability Insurance. ALL EAC's must submit an application form with a certificate of insurance prior to the 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. / DISTRIBUTECH 2025

6 Research Drive, Shelton, CT 06484

Under *Description of Operations*, please include:

All activities related to DISTRIBUTECH 2025 / March 24th – March 27th, 2025 Kay Bailey

Hutchison Convention Center

Dallas, TX, USA

Complete Certificates of Liability Insurance must be uploaded to the exhibitor resource center. Certificates of Liability Insurance will not be accepted via email or mail. Please contact your Exhibitor Services Team at DISTRIBUTECH.ES@clarionevents.com with any questions.

(Coming Soon): If you do not have insurance, or you would rather not use your own insurance, (like when you rent a car – so that claims would not be filed against your policy), we have set up a program in which, you can purchase compliant insurance instantly online.

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 Exhibitor Appointed Contractor Form found in the The Expo Group's exhibitor manual. The EAC will also have to provide a Certificate of Liability Insurance as described above.

Any questions related to the Certificates of Liability Insurance or an EAC should be directed to your Exhibitor Services Team at DISTRIBUTECH.ES@clarionevents.com.

SAMPLE

CERTIFICATE OF INSURANCE					DATE (MM/DD/YY)
PRODUCER YOUR INSURANCE COMPANY NAME/PHONE NUMBER OF CONTACT PERSON		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. This CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
CODE SUB-CODE INSURED YOUR COMPANY NAME AND ADDRESS		COMPANIES AFFORDING COVERAGE			
		COMPANY LETTER A			
		COMPANY LETTER B SAMPLE			
		COMPANY LETTER C			
		COMPANY LETTER D			
		COMPANY LETTER E			
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 EFFECTIVE DATE(MM/DD/YY)	POLICY EXPIRATION DATE(MM/DD/YY)	ALL LIMITS IN THOUSANDS
	GENERAL LIABILITY	SAMPLE	YOUR EFFECTIVE DATES		GENERAL AGGREGATE \$1,000
X	COMMERCIAL GENERAL LIABILITY				PRODUCTS-COM-OPS AGGREGATE \$1,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR.				PERSONAL & ADVERTISING INJURY \$1,000
	OWNERS' & CONTRACTORS' PROT.				EACH OCCURRENCE \$1,000
					FIRE & DAMAGE (Any one fire) \$50
					MEDICAL EXPENSE (Any one person) \$5
	AUTOMOBILE LIABILITY	SAMPLE			COMBINED SINGLE LIMIT \$1,000
	ANY AUTO				BODILY INJURY (Per person) \$
X	ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	SCHEDULED AUTOS				PROPERTY DAMAGE \$
X	HIRED AUTOS				
	NON-OWNED AUTOS				
	GARAGE LIABILITY				
	EXCESS LIABILITY				EACH OCCURRENCE \$ AGGREGATE \$
	<input type="checkbox"/> UMBRELLA FORM				
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				
X	WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY	SAMPLE			STATUTORY \$ 1,000 (EACH ACCIDENT) \$ (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

<p style="text-align: center;"> The Event Name 6 Research Drive Shelton, CT 06484 </p>	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OR ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES
	AUTHORIZED REPRESENTATIVE

