

CERTIFICATE OF INSURANCE & EAC POLICY

Certificate of Insurance

A **requirement** of exhibiting at **HYDROVISION INTERNATIONAL 2023** is for **ALL** exhibitors to carry liability insurance throughout the Exhibition. The deadline for submitting the Certificate indicating adequate insurance coverage is **June 12th, 2023**. 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. / HYDROVISION INTERNATIONAL 2023
6 Research Drive, Shelton, CT 06484

Under *Description of Operations*, please include: All activities related to HYDROVISION INTERNATIONAL, July 9-14, 2023 Charlotte Convention Center, 01 S College St, Charlotte, NC 28202.

Complete Certificates of Liability Insurance <u>must</u> be uploaded to the exhibitor portal.

Certificates of Liability Insurance <u>will not be accepted via email or mail</u>. Your company password to access the portal can be found in your confirmation letter. Please contact your Exhibit Services Manager at <u>Breanna.Pitts@clarionevents.com</u> 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.

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

CERTIFICATE OF INSURANCE				DATE (MM/DD/YY)
PRODUCER THIS CERTIFICATE IS ISSUED AS CONFERS NO RIGHTS UPON THE CERTIFICATE DOES NOT AMEND NAME/PHONE NUMBER OF CONTACT PERSON AFFORDED BY THE POLICIES BE			EHTS UPON THE CERTIFICATES NOT AMEND, EXTEND OF	E HOLDER. This
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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 TH	OUSANDS	
	GENERAL LIABILITY				GENERAL AGGREGATE			\$1,000
	X COMMERCIAL GENERAL LIABILITY				PRODUCTS-C	OM-OPS AGGREG	ATE	\$1,000
	CLAIMS MADE X OCCUR.	SAMPLE	YOUR EFFECTIVE DATES		PERSONAL & ADVERTISING INJURY			\$1,000
	OWNERS' & CONTRACTORS' PROT.				EACH OCCUR	RENCE		\$1,000
					FIRE & DAMAC	GE (Any one fire)		\$50
					MEDICAL EXP	ENSE (Any one per	rson)	\$5
	AUTOMOBILE LIABILITY				COMBINED			
	ANY AUTO				SINGLE	\$1,000		
	X ALL OWNED AUTOS				LIMIT			
	SCHEDULED AUTOS	SAMPLE			BODILY INJURY	\$		
	X HIRED AUTOS				(Per person)	Φ		
					BODILY			
	NON-OWNED AUTOS				INJURY			
	GARAGE LIABILITY				(Per accident)	\$		
					PROPERTY DAMAGE	\$		
	EXCESS LIABILITY					EACH	AGGREGATE	
	UMBRELLA FORM					OCCURRENCE	•	
	OTHER THAN UMBRELLA FORM					\$	\$	
	X WORKER'S COMPENSATION				STATUTORY			
	AND	SAMPLE			\$ 1,000	(EACH ACCIDEN	NT)	
	EMPLOYER'S LIABILITY				\$	(DISEASE- POL	ICY LIMIT)	
					\$	(DISEASE - EAC	CH EMPLOYEE))	
	OTHER							

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

CERTIFICATE HOLDER

CANCELLATION

The Event Name 6 Research Drive	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEROF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 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
Shelton, CT 06484	AUTHORIZED REPRESENTATIVE