CER	TIFICATE OF INSURAN	ICE			ISSUE DATE		
PRODUCER			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.				
			ALIER THE C				
			COMPANY	I A Carrier with at least B. Bost rating & VI Linancial Size			
INSURED  Vendor/ Supplier or Sub Contractor			COMPANY	В			
			COMPANY LETTER	C D			
Listed INSURED includes		COMPANY					
		the exact name of the Company for whom the Certificate is issued.	COMPANY	E			
			LETTER	-			
	RAGES						
EQUIRI SURAI	TO CERTIFY THAT THE POLICIES LISTEI EMENT, TERM OR CONDITION OF ANY ONCE AFFORDED BY THE POLICIES DESI	CONTRACT OR OTHER DOCUME	ENT WITH RESPECT	TO WHICH THIS CERT	FIFICATE MAY BE ISSUED OR MAY P	ERTAIN, THE S SHOWN MAY HAVE	
O R	EDUCED BY PAID CLAIMS.  TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMITS	Coverage Limits must be no less than what is sta	
GI	ENERAL LIABILITY		(MM/DD/YY)	(MM/DD/YY)	GENERAL AGGREGATE	\$ 5000000	
	COMMERCIAL GENERAL LIABILIT	Υ			PRODUCTS-COMP/OP AGG.	\$ <sup>5</sup> 000000	
	CLAIMS MADE X O	CCUR			PERSONAL & ADV. INJURY	\$ 1000000	
			Policy dates ("F	Effective" and	EACH OCCURRENCE FIRE	\$ 1000000 \$	
$\perp$			"Expiration") ne		DAMAGE (Any one fire)	50000\$	
			current and co		MEDEXPENSE(Anyonepers	5000	
			Work will be pe	- Informed	on)		
Αl	JTOMOBILE LIABILITY				COMBINED	\$ 1000000	
$\rightarrow$	ANY AUTO				SINGLE LIMIT		
	ALL OWNED AUTOS				BODILY INJURY	\$	
<u> </u>	SCHEDULED AUTOS				(Per person)		
	HIRED AUTOS				BODILY INJURY	\$	
$\vdash$	NON-OWNED AUTOS	\	(		(Per accident)	<u> </u>	
-	GARAGE LIABILITY			<del></del>	PROPERTY DAMAGE	\$	
	OTHER CONTROL AND LATE		umbers are listed		EACH COOLIDDENICE	Φ.	
E/	XCESS LIABILITY	for each	Line of Busines	S	EACH OCCURRENCE	\$   \$	
$\vdash$	UMBRELLAFORM OTHER THAN HARBELLA FORM				AGGREGATE	\$	
A	WORKERS COMPENSATION				STATUTODY I IMITS		
^	AND				STATUTORY LIMITS  EACH ACCIDENT	\$ 500000	
	EMPLOYERS' LIABILITY				DISEASE-POLICY LIMIT	\$ 500000	
	Z ZOTERO EIABIEIT				DISEASE EACH EMPLOYEE	\$ 500000	
十						,	
1							
SCRIE	PTION OF OPERATIONS/LOCATIONS/VE	HICLES/SPECIAL ITEMS	•	•	•	•	
ne er	ntities and individuals listed	on Exhibit "A" are here	by collectively	<mark>/ named as addi</mark>	tional insureds with respe	<mark>ects to the fo</mark> re	
ener	<mark>al Liability and Automobile L</mark>	<mark>.iability coverag</mark> es.					
		The "Additiona	l Inquirade" ara a	list of logal antities	s for both our company and the	huilding owner t	
				•	red's are on a second page, it	•	
		section reflects	s the existence o	f the "Additional Ins	sureds" page. Either the front o	of the certificate o	
EDT	FICATE HOLDER				as "Additional Insureds". It is n	ot acceptable to	
ENH	HOATE HOLDEN	specify on the	certificate "see a				
			BEFORE THE ENDEAVOR THOUDER NAI IMPOSE NO	E EXPIRATION DAT TO MAIL <u>30</u> DAYS ' MED TO THE LEFT OBLIGATION OR L	DESCRIBED POLICIES BE CA E THEREOF, THE ISSUING CO WRITTEN NOTICE TO THE CE , BUT FAILURE TO MAIL SUC LABILITY OF ANY KIND UPON	OMPANY WILL RTIFICATE H NOTICE SHALL	
				ITS AGENTS OR REPRESENTATIVES.  AUTHORIZED REPRESENTATIVE			
		_					
D 37 (	(6-94)		_				
,	Levy Re	estaurants + the					
	Event L	ocation's Address					