

DATE (MM/DD/YYYY) 6/21/2022

CERTIFICATE OF LIABILITY INSURANCE

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.

lf tł	SUBROGATION IS WAIVED, subjecting subjections to subject the subject of the subject in the subje	ct to	the cert	terms and conditions of ificate holder in lieu of su	the pol	licy, certain ¡ lorsement(s)	oolicies may	require an endorsemen	t. As	tatement on							
PRODUCER NFP Property & Casualty Services, Inc. 100 Great Meadow Road Suite 705 Wethersfield, CT 06109						CONTACT Augusto Russell PHONE (A/C, No, Ext): (860) 764-0550 E-MAIL ADDRESS: augusto.russell@nfp.com											
												INSURER(S) AFFORDING COVERAGE NAIC #					
												INSURER A : Philadelphia Indemnity Insurance Company					
						INSURED Steve Kolnik Cross Current Conservation Association 135 South Rd						INSURER B:					
												INSURER C:					
INSURER D:																	
Farmington, CT 06032					INSURER E:												
						INSURER F:											
COVERAGES CERTIFICATE NUMBER:						REVISION NUMBER:											
IN C	HIS IS TO CERTIFY THAT THE POLICIE IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	EQUI PER POLI	IREMI TAIN, CIES.	ENT, TERM OR CONDITION THE INSURANCE AFFOR LIMITS SHOWN MAY HAVE	N OF A DED BY	NY CONTRAC THE POLICI REDUCED BY I	CT OR OTHER ES DESCRIB PAID CLAIMS.	DOCUMENT WITH RESPE	CT TO	WHICH THIS							
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s								
Α	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	1,000,000							
	CLAIMS-MADE X OCCUR			PPK2365685		1/1/2022	1/1/2023	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000							
								MED EXP (Any one person)	\$	5,000							
								PERSONAL & ADV INJURY	\$	1,000,000							
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000							
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	2,000,000							
	OTHER:							COMBINED SINGLE LIMIT	\$								
	AUTOMOBILE LIABILITY							(Ea accident)	\$								
	ANY AUTO OWNED SCHEDULED							BODILY INJURY (Per person)	\$								
	OWNED AUTOS ONLY AUTOS							BODILY INJURY (Per accident)	\$								
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$								
									\$								
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE							EACH OCCURRENCE	\$								
								AGGREGATE	\$								
								PER OTH- STATUTE ER	\$								
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE								•								
	OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$								
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT									
	DESCRIPTION OF OPERATIONS DEIOW							E.L. DISEASE - POLICY LIMIT	Ф								
DES Sch	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL edule of Members amended effective 06	LES (<i>i</i>	ACORE	o 101, Additional Remarks Schedu o Include Steve Kolnik.	lle, may b	e attached if mor	e space is requir	ed)									
						0.4.10F1.1.4.T10.1.											
CERTIFICATE HOLDER						CANCELLATION											
Gravy Boat Guide Service LLC/ Steve Kolnik 310 South Pine Street Summit Hill, PA 18250						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE											