

## LIABILITY INSURANCE

## LIABILITY INSURANCE NOTICE

National Marine Manufacturers Association requires each exhibitor to submit a current version of their Certificate of Insurance as part of the contract requirements.

Please have your insurance agent or broker provide a current Certificate of Insurance within thirty (30) business days to avoid any issues.

The Certificate of Insurance must meet the highlighted SPECIFIC requirements documented in the <u>SAMPLE CERTIFICATE</u>. This is the only document we will accept. All other documents will be returned. You will not have access to order Digital Credentials or Be My Guest Tickets until it is corrected.

You can upload your certificate through the NMMA Portal.

If you have not received your individual link to the portal, please contact Monica Puentes at mpuentes@nmma.org

NOTE: Auto coverage is only required if you are driving into the facility or operating an auto on the show floor.

Should you have any questions, please contact Monica Puentes at <a href="mailto:mpuentes@nmma.org">mpuentes@nmma.org</a>.

If you wish to purchase General Liability Insurance then you can use the link below:

## **CLICK HERE TO PURCHASE GENERAL LIABILITY**

Or copy and paste the link below to your web browser — https://domex.undtec.com/?domex=yes

## CERTIFICATE OF LIABILITY INSURANCE $ACORD_{\scriptscriptstyle{\sqcap}}$

DATE (MM/DD/YYYY) 07/16/2024

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.

	SUBROGATION IS WAIVED, subject to his certificate does not confer any right						uire an endorsement. A s	statement on	
PRODUCER Your Agent or Broker Address					CONTACT NAME:				
					PHONE (A/C, No, Ext):		FAX (A/C No)		
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Cit	y, State, Zip			ADDRE	SS:	111011050(0) 4		NA10 #	
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INSU	Your company Name			INSURE	R B : CDE Insi	urance Comp	pany	67890	
	Address			INSURE	R C :				
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	City, State,Zip			INSURE	INSURER E:				
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CO	VERAGES CER	ΓIFIC <i>A</i>	ATE NUMBER:	·			REVISION NUMBER:	·	
IN C E	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE- ERTIFICATE MAY BE ISSUED OR MAY P XCLUSIONS AND CONDITIONS OF SUCH I	QUIRE! ERTAII POLIC	MENT, TERM OR CONDITION N, THE INSURANCE AFFORI CIES. LIMITS SHOWN MAY F	OF ANY DED BY T	CONTRACT OF HE POLICIES N REDUCED F	R OTHER DO DESCRIBED BY PAID CLA	CUMENT WITH RESPECT HEREIN IS SUBJECT TO A IMS.	TO WHICH THIS ALL THE TERMS,	
INSR LTR		ADDL S	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	S	
Α	X COMMERCIAL GENERAL LIABILITY		Your Policy No.		1/1/24	1/1/25	EACH OCCURRENCE	\$1,000,000	
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000	
			Specimen Only				MED EXP (Any one person)	\$	
							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	\$1,000,000	
	OTHER:						TROBUSTO COMITO TROC	\$	
В	AUTOMOBILE LIABILITY		Your Policy No.		1/1/24	1/1/25	COMBINED SINGLE LIMIT (Ea accident)	<sub>\$</sub> 500,000	
	X ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY AUTOS ONLY		Policy dates mu	ust cov	er show	dates ind	cluding move-in ar	nd move-out	
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	
	DED RETENTION \$							\$	
	WORKERS COMPENSATION						PER OTH- STATUTE ER		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE						E.L. EACH ACCIDENT	\$	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A					E.L. DISEASE - EA EMPLOYEE		
	If ves. describe under								
	DÉSCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	Φ	
Atl Na	   CRIPTION OF OPERATIONS / LOCATIONS / VEHIC   antic City Boat Show - February 2   tional Marine Manufacturers and A   neral Liability and auto liability.	2nd t	o March 5th, 2025 inclu	ding mo	ve-in and n	nove-out	,		
CERTIFICATE HOLDER					CANCELLATION				
CERTIFICATE HOLDER					CANCELLATION				
	National Marine Manufac	e	sно			ESCRIBED POLICIES BE CA			

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ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Association

Chicago, IL 60603

10 S LaSalle Street, Suite 3500