2/13/2024

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. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

		• • • • • • • • • • • • • • • • • • • •				
PRODUCER		CONTACT				
		NAME: Todd Tyler				
	Cossio Insurance Agency	PHONE	FAX			
	PO Box 5987	(A/C, No. Ext): (864) 688-0121	(A/C, No.)			
	Greenville, SC 29606	E-Mail Address: tammy@cossioinsurance.com				
		INSURER(S) AFFORDING COVERAGE	NAIC #			
INSURED		INSURER A: Berkley Specialty Insurar	31295			
	Incredible! Inflatables & Amusements, LLC DBA Hendersonville	INSURER B: Berkley Life & Health Ins	64890			
	Bounce 221 Childs Drive Hendersonville, NC 28791	INSURER C:				
		INSURER D:				
		INSURER E:				
001/5	DAGEG GERTIEIGATE MUMBER	DEVICE AND ADDRESS OF THE PROPERTY OF THE PROP				

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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, THE 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.

INSR	HE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY EFF POLICY EXP									
LTR	TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS			
	☑ COMMERCIAL GENERAL LIABILITY			BPK 0184788 - 21	3/2/2024	3/2/2025	EACH OCCURRENCE	\$1,000,000		
	□CLAIMS-MADE ⊠ OCCUR						DAMAGE TO RENTED PREMISES	\$100,000		
	GEN'L AGGREGATE LIMIT APPLIES PER						MED EXP (Any one Person)	Excluded		
	⊠POLICY □ PROJECT □ LOC						PERSONAL & ADV INJURY	\$1,000,000		
							GENERAL AGGREGATE	\$2,000,000		
	☐ OTHER:						PRODUCTS – COMP/OP AGG	\$2,000,000		
	AUTOMORU E LIARU ITV						DEDUCTIBLE	\$2,500		
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT	\$		
	☐ ANY AUTO						BODILY INJURY (Per person)	\$		
	☐ OWNED ☐ SCHEDULED AUTOS ONLY AUTOS						BODILY INJURY (Per accident)	\$		
	☐ HIRED ☐ NON-OWNED AUTOS ONLY AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$		
	☐ UMBRELLA LIAB ☐ OCCUR						EACH OCCURRENCE	\$		
	☐ EXCESS LIAB ☐ CLAIMS- MADE						AGGREGATE	\$		
	□ DED □ RETENTION \$							\$		
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY Y/N						PER STATUTE OTH-ER			
	ANY PROPRIETOR/PARTNER/ EXECUTIVE/OFFICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$		
	(Mandatory in NH)									
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE – EA EMPLOYEE E.L. DISEASE – POLICY LIMIT	\$ \$		
В	Accident Medical			PAI L012010895802	3/2/2024	3/2/2025	Deductible Amount Per Covered	·		
							Person Maximum Benefit Per Covered	\$100		
							Person	\$25,000		
2 Addition medical				2012010000002	3,2,202	0,2,2020	Loss Period after Accident	90 Days		
							Full Excess Medical Expense	\$25,000		
DEGG	NIDTION OF OREDATIONS / LOCATIONS / L	 		404 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			Principal Sum	\$25,000		
DESCI	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)									

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Party Equipment Rentals Operations located at 2417 Brevard Rd, Hendersonville, NC 28791. For verification purposes only.

Incredible! Inflatables & Amusements, LLC DBA Hendersonville Bounce 221 Childs Drive

CANCELLATION

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

The

CERTIFICATE HOLDER:

Hendersonville, NC 28791