

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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(les) 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:	John Doe		
ABC Insurance Agency		PHONE (A/C, No. Ex	t):XXX-XXX-XXXX	FAX (A/C, No):	
123 ABC Rd.		E-MAIL ADDRESS:	12345@abcinsurance.com		
Smyrna, GA 30080		INSURER(S) AFFORDING COVERAGE			NAIC#
•		INSURER A	: Insurance Company A		
ABC Construction, LLC 456 Construction Lane. Smyrna, GA 30080		INSURER B: Insurance Company B			
		INSURER C: Insurance Company C			
		INSURER D: Insurance Company D			
		INSURER E:			
COVERAGES	CERTIFICATE NUMBER:	***************************************	REVISION NI	IMRED.	<u> </u>

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 REEN REDUICED BY PAID CLASSES.

INSR LTR	TYPE OF INSURANCE	ADDL SUBF	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	555.5	
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	T Y	12345678	1/1/2024	1/1/2025	'EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:	ADDL INSD: SHOULD	(30)			MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000
	POLICY PRO- OTHER:		HAVE "Y"			GENERAL AGGREGATE \$ 2,000,000
	AUTOMOBILE LIABILITY X ANY AUTO		910111213	1/1/2024	1/1/0005	COMBINED SINGLE LIMIT \$ 1,000,000
В	WNED AUTOS ONLY X AUTOS ONLY AUTOS ONLY AUTOS ONLY			1/1/2024	1/1/2025	BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
_						(rei accident) \$
С	X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MAD		1,415161,718	1/1/2024	1/1/2025	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
\dashv	DED RETENTION S() WORKERS COMPENSATION		3,3314			\$
AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE Y/N		N/A	WC19202122	1/1/2024	1/1/2025	X PER OTH- STATUTE ER STATUTE STATUT
						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The Company's you are requesting COIs from can't specifically list the PARISH/SCHOOL as an Additional Insured in this box any longer due to BULLETIN 23-EX-9 from the Office of Commissioner of Insurance and Safety Fire. They can only add policy endorsements in this box. For Example:

-CG 20 10 12 19 ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - SCHEDULED PERSON OR ORGANIZATION -CG 20 33 04 13 ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - AUTOMATIC STATUS WHEN REQUIRED BY WRITTEN CONSTRUCTION CONTRACT WITH YOU

CERTIFICATE-HOLDER	CANCELLATION
Insert Name of PARISH/SCHOOL Archbishop Gregory J. Hartmayer, Archbishop of the Archdiocese of Atlanta, as Trustee of the AoA Parish Real Estate Trust, dated January 4, 2013, and His Appointed Successors and/or Administrators	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Name PARISH/SCHOOL to protect Parish/School Entity
2401 Lake Park Dr. SE Smyrna, GA 30080-8862	AUTHORIZED REPRESENTATIVE Name Archbishop & AoA Parish Real Estate to protect Poperty

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ADDITIONAL INSURED

Insurers are no longer allowed to specifically list your Parish/School as an additional insured in the <u>DESCRIPTION OF OPERATIONS</u> section of the COI. They can only list applicable policy endorsements to show that they have the appropriate coverage on their policy.

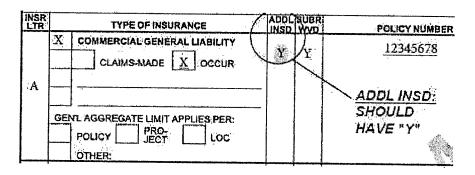
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

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- Additional Insured-Owners, Lessees, or Contractors Scheduled Person or Organization
 - This policy endorsements means the outside entity must specifically endorse you on to their policy for you to obtain additional insured status. You would need a copy of the policy endorsement to verify your Additional Insured status.
- Blanket Additional Insured When Required by Written Contract, Written Agreement
 - o When this endorsement is listed on the COI, your Additional Insured status does not trigger unless there is a written contract/agreement in place requiring that they name you as an Additional Insured. No contract/agreement means to Additional Insured status.

To verify that the entity carries the Additional Insured coverage on their policy, the $\underline{ADDL\ INSD}$ must be marked $\underline{"Y"}$.



CERTIFICATE HOLDER

The CERTIFICATE HOLDER section of the COI should list the following:

- Name of Parish/School
- Archbishop Gregory J. Hartmayer, Archbishop of the Archdiocese of Atlanta, as Trustee of the AoA
 Parish Real Estate Trust, dated January 4, 2013, and His Appointed Successors and/or
 Administrators.

Naming the Parish/School protects the legal entity that is the Parish/School from liability. Naming the Archbishop and AoA Parish Real Estate Trust protects the Property owner from liability.

