

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/18/2024

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 cartificate does not confer rights to the cartificate holder in liqu of such endorsement(s)

| this certificate does not come rights to the certificate florder in fied of sach endorsement(s). | | | | | | |
|--|---|----------|---|-------------------|--------|--|
| PRODUCER | Lockton Companies | | CONTACT NAME: | | | |
| | Three City Place Drive, Suite | 900 | PHONE (A/C, No, Ext): | FAX (A/C, No): | | |
| | St. Louis MO 63141-7081 | | E-MAIL ADDRESS: | | | |
| | (314) 432-0500 midwestcertificates@lockton | cton.com | INSURER(S) AFFORDING COVERAGE | | NAIC # | |
| | inia westeer tirre ates e rockton | | INSURER A: Ironshore Specialty Insurance Co | | 25445 | |
| insured 1459812 | Ideal Option, PLLC | | INSURER B: Trumbull Insurance Company | | 27120 | |
| | Ideal Balance, PLLC | | INSURER C: Twin City Fire Insurance Compar | ıy | 29459 | |
| | 5615 Dunbarton Ave. | | INSURER D : | | | |
| | Pasco WA 99301 | | INSURER E : | | | |
| | | | INSURER F: | | | |
| | | | | | | |

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 LTR | | ADDI 🗈 | | EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. NSR POLICY EFF POLICY EXP | | | | | | | |
|-------------|---|--------|---|---|----------------------------|----------------------------|---|---------------------------|--|--|--|
| Λ | 111201 1110011111102 | INSD | | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | | | | |
| ^ [| X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR | N | N | HC7CACICCT002 | 5/1/2023 | 5/1/2024 | DAMAGE TO RENTED | \$ 1,000,000 \$ 50,000 | | | |
| | Deductible: \$20,000 | | | | | | MED EXP (Any one person) | \$ 5,000 | | | |
| L | | | | | | | PERSONAL & ADV INJURY | \$ Included | | | |
| L | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | | GENERAL AGGREGATE | \$ 5,000,000 | | | |
| L | X POLICY PRO- JECT LOC | | | | | | PRODUCTS - COMP/OP AGG | \$ Included | | | |
| | OTHER: | | | | | | | \$ | | | |
| В | AUTOMOBILE LIABILITY | N | N | 84 UEN AE0441 | 5/1/2023 | 5/1/2024 | COMBINED SINGLE LIMIT (Ea accident) | \$ 1,000,000 | | | |
| L | X ANY AUTO | | | | | | BODILY INJURY (Per person) | \$ XXXXXXX | | | |
| | OWNED SCHEDULED AUTOS ONLY AUTOS | | | | | | BODILY INJURY (Per accident) | \$ XXXXXXX | | | |
| | HIRED NON-OWNED AUTOS ONLY | | | | | | PROPERTY DAMAGE (Per accident) | \$ XXXXXXX | | | |
| | | | | | | | Comp/Coll Ded. | \$ 1,000 | | | |
| Α | UMBRELLA LIAB OCCUR | N | N | HC7CACICER002 | 5/1/2023 | 5/1/2024 | EACH OCCURRENCE | \$ 5,000,000 | | | |
| | X EXCESS LIAB X CLAIMS-MADE | | | | | | AGGREGATE | \$ 5,000,000 | | | |
| | DED RETENTION \$ | | | | | | | \$ XXXXXXX | | | |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | N | 84 WE AK9VNR | 5/1/2023 | 5/1/2024 | X PER OTH-ER | | | | |
| C , | C ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? | | | 84 WE AL0EK6 | 5/1/2023 | 5/1/2024 | E.L. EACH ACCIDENT | \$ 1,000,000 | | | |
| - (| | | | | | | E.L. DISEASE - EA EMPLOYEE | \$ 1,000,000 | | | |
| | f yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | E.L. DISEASE - POLICY LIMIT | \$ 1,000,000 | | | |
| A | Professional Liability | N | N | HC7CACICCT002 | 5/1/2023 | 5/1/2024 | Limits: SEE BELOW Deductible: \$20,000 Retro Date: 7/1/2012 | | | | |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
THIS CERTIFICATE SUPERSEDES ALL PREVIOUSLY ISSUED CERTIFICATES FOR THIS HOLDER, APPLICABLE TO THE CARRIERS LISTED AND THE POLICY TERM(S) REFERENCED.

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*Professional Liability - \$1,000,000 per claim/\$5,000,000 aggregate; Per Location/Provider Aggregate applies. Professional Liability and General Liability Retro Date: 7/1/2012 or as referenced for scheduled locations. Professional Liability and General Liability and General Liability total combined policy aggregate \$10,000,000.

*Excess applies to General Liability, Automobile Liability, Employers' Liability, and Professional Liability. Excess retro date: 4/1/2018. Snohomish County is included as additional insured if required by written contract with respect to General Liability per the terms and conditions of the policy.

| CERTIFICATE HOLDER | CANCELLATION See Attachment |
|--|--|
| 20393673 Snohomish County 3020 Rucker Ave. | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
| Everett, WA 98201 | AUTHORIZED REPRESENTATIVE |

Attachment Code: D545910 Master ID: 1459812, Certificate ID: 20393673



Snohomish County 3020 Rucker Ave. Everett, WA 98201

To whom it may concern:

In our continuing effort to provide timely certificate delivery, Lockton Companies is transitioning to paperless delivery of Certificates of Insurance.

To ensure electronic delivery for future renewals of this certificate, we need your email address. Please contact us via one of the methods below, referencing Certificate ID 20393673.

Email: STL-edelivery@lockton.comPhone: (866) 728-5657 (toll-free)

If you received this certificate through an internet link where the current certificate is viewable, we have your email and no further action is needed.

In the event your mailing address has changed, will change in the future, or you no longer require this certificate, please let us know using one of the methods above.

The above inbox is for providing e-Delivery email addresses for next year's renewal certificates ONLY. Your information will be input within 90 days.

Thank you for your cooperation and willingness in reducing our environmental footprint.

Lockton Companies