

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/01/2023

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).

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PRODUCER MARSH USA, LLC.	CONTACT ? NAME: PHONE FAX	
99 HIGH STREET	(A/C, No, Ext): (A/C, No):	
BOSTON, MA 02110	E-MAIL ADDRESS:	
Attn: Boston.Certrequest@marsh.com	INSURER(S) AFFORDING COVERAGE	NAIC#
CN101980216-US-MA-GAWUP-23-	INSURER A: Federal Insurance Company	20281
UKG Kronos Systems LLC 900 Chelmsford Street Lowell, MA 01851	INSURER B: Great Northern Insurance Company	20303
	INSURER C : ACE American Insurance Company	22667
	INSURER D : Arch Insurance Company	11150
	INSURER E:	
	INSURER F:	
COVERAGES CERTIFICATE NUMBER:	NYC-011196141-08 REVISION NUMBER: 3	
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. ADDL SUBR INSD WVD POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER LIMITS **COMMERCIAL GENERAL LIABILITY** Χ 3606-40-33 12/01/2023 12/01/2024 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED \$ CLAIMS-MADE X OCCUR 1,000,000 \$ PREMISES (Ea occurrence) 10.000 MED EXP (Any one person) \$ 1,000,000 PERSONAL & ADV INJURY \$ 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE \$ PRO-JECT POLICY 2,000,000 PRODUCTS - COMP/OP AGG \$ \$ OTHER: COMBINED SINGLE LIMIT (Ea accident) 73617085 12/01/2023 **AUTOMOBILE LIABILITY** 12/01/2024 \$ 1,000,000 ANY AUTO BODILY INJURY (Per person) \$ OWNED AUTOS ONLY HIRED SCHEDULED AUTOS NON-OWNED **BODILY INJURY (Per accident)** \$ PROPERTY DAMAGE (Per accident) \$ AUTOS ONLY **AUTOS ONLY** \$ UMBRELLA LIAB 78192757 12/01/2024 10,000,000 Χ Χ 12/01/2023 OCCUR **EACH OCCURRENCE** \$ **EXCESS LIAB** 10,000,000 CLAIMS-MADE AGGREGATE \$ DED X RETENTION \$ 10.000 \$ WORKERS COMPENSATION 71834474 12/01/2023 12/01/2024 X PER STATUTE AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? 1 000 000 E.L. EACH ACCIDENT \$ Ν N/A 1,000,000 (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below 1.000.000 E.L. DISEASE - POLICY LIMIT \$ PROF LIAB / TECH E&O / CYBER 10,000,000 Limit: NPL0067548-02 12/01/2023 12/01/2024 COMMERCIAL PROPERTY 3606-40-33 12/01/2023 12/01/2024 ALL RISK

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

Snohomish County, its officers, officials, employees and agents are included as additional insured on the General Liability policy if required by written contract with named insured prior to loss/claim.

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
March USA LLC