ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/03/2022

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 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

Chappell Insurance
4335 Cox Road, Ste 4335
Glen Allen, VA, 23060

CONTACT NAME: Daryl Chappell
PHONE (A/C, No. Ext): 804-733-2020 FAX (A/C, No): 804-591-1603
E-MAIL ADDRESS: support@chappellinsurance.com

INSURED

Lake Erie Scouts 12U
5639 Swanville Road
Erie, PA 16506

(1)Team Name(s): Lake Erie Scouts 12U

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Nationwide Mutual Insurance Company	23787
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES CERTIFICATE NUMBER: RPG-BB-7-000801 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	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE [X] OCCUR X PLL - $2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PROJECT LOC X OTHER:			RPG318565-00	01/01/2022 12:01 AM	01/01/2023 12:01 AM	EACH OCCURRENCE	2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	1,000,000
							MED EXP (Any one person)	
							PERSONAL & ADV INJURY	2,000,000
							GENERAL AGGREGATE	5,000,000
							PRODUCTS-COMP/OP AGG	2,000,000
							PARTICIPANT LEGAL LIABILITY	2,000,000
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION						EACH OCCURRENCE	
							AGGREGATE	
A	PARTICIPANT ACCIDENT			RPG318565-00	01/01/2022 12:01 AM	01/01/2023 12:01 AM	EXCESS MEDICAL	100,000
							DEDUCTIBLE	$500.00

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

The insured is covered for amateur practice and play in any association. This insurance covers one (1) team only with maximum of 20 players per team for Baseball.

Coverage Effective From 06:20 PM on 01/03/2022 TO 01/01/2023

CERTIFICATE HOLDER

Certificate Number: RPG-BB-7-000801

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

Scott Tunbull

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