

# CERTIFICATE OF LIABILITY INSURANCE

**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 POLICY LISTED BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER, AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.**

<b>INSURER AFFORDING COVERAGE:</b>	New York Marine And General Insurance Company 59 Maiden Lane, 27 <sup>th</sup> Floor New York, NY 10038 NAIC #: 16608
<b>PRODUCER</b>	ProSight Specialty Insurance Solutions, LLC
	412 Mt. Kemble Avenue 300C
	Morristown, NJ 07960
	866-703-7747
<b>INSURED:</b>	(Name)
	(Street Address)
	(City, State, Zip Code)

TEXAS DEPT. OF INSURANCE  
 AUSTIN, TEXAS  
 APPROVED  
 FEB 21 2018

## COVERAGE

**THIS IS TO CERTIFY THAT THE POLICY OF INSURANCE LISTED BELOW HAS 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.**

<b>POLICY NUMBER:</b>			
<b>POLICY TERM:</b>	<b>EFFECTIVE DATE:</b>		<b>EXPIRATION DATE:</b>
<b>TYPE OF INSURANCE:</b>	COMMERCIAL GENERAL LIABILITY (Occurrence Basis)		
<b>LIMITS OF INSURANCE</b>			
EACH OCCURRENCE		\$	
DAMAGE TO RENTED PREMISES (Each Occurrence)		\$	100,000
MEDICAL PAYMENTS (Any one person)		\$	5,000
GENERAL AGGREGATE		\$	
PRODUCTS/COMPLETED OPERATIONS AGGREGATE		\$	

<b>ADDITIONAL INSURED ENDORSEMENTS</b>	
CG 20 11 04 13	Additional Insured – Managers or Lessors of Premises
CG 20 34 04 13	Additional Insured – Lessor of Leased Equipment – Automatic Status when Required in Lease Agreement

**DESCRIPTION OF OPERATIONS**  
 All activities associated with the insured's conduct of business as a DJ (disc jockey) hired to perform for live audiences at a venue or event.

<b>CERTIFICATE HOLDER</b>	(Name)
	(Street Address)
	(City, State, Zip Code)

Signature of Authorized Representative

