Client#: 149057 MELJIF1

ACORD.

CERTIFICATE OF LIABILITY INSURANCE

9/27/2018

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).

certificate holder in l	lieu of such endorsement(s).	8					
PRODUCER	800 16	CONTACT MEL Underwriting Service Centr	CONTACT MEL Underwriting Service Centr				
Conner Strong & Buckelew MEL Underwriting Unit 40 Lake Center Executive Park Marlton , NJ 08053		PHONE (A/C, No, Ext): FAX (A/C, 1	No): 732-736-5274				
		INSURER(S) AFFORDING COVERAGE	NAIC#				
		INSURER A: TRICO Municipal JIF					
INSURED	of Wookington	INSURER B : Municipal Excess Liability JIF					
Township of Washington 523 Egg Harbor Road, PO Box 1106 Turnersville, NJ 08012		INSURER C:					
		INSURER D:					
Turnersvii	iie, NJ 00012	INSURER E:					
		INSURER F:					
COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:					
INDICATED, NOTWITHS CERTIFICATE MAY BE	STANDING ANY REQUIREMENT, TERM OR ISSUED OR MAY PERTAIN, THE INSURAN	ED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR TO CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECTED AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.	CT TO WHICH THIS				
INSR TYPE OF IN	SURANCE ADDL SUBR	POLICY EFF POLICY EXP	MITS				

INSR LTR	TYPE OF INSURANCE	ADDL SUB	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
Α	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR		TRI191001-91		01/01/2020	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY	\$ 500,000 \$ \$ \$
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRODUCT LOC OTHER:					GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$ \$ \$
Α	AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS AUTOS X HIRED AUTOS X AUTOS AUTOS NON-OWNED AUTOS		TRI191001-91	01/01/2019	01/01/2020	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$500,000 \$ \$ \$ \$
В	UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE		MEL01190187	01/01/2019	01/01/2020	EACH OCCURRENCE AGGREGATE	\$4,500,000 \$4,500,000 \$
A	WORKERS SOMETHOUSE		TRI191001-91	01/01/2019	01/01/2020	X PER OTH- E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	\$2,000,000 \$2,000,000 \$2,000,000
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	TIES (ACOR	D 101 Additional Pamarks Schadular	may be attached if me	see enace le requi	(red)	

CERTIFICATE HOLDER	CANCELLATION				
Future Stars 922 East Chocolate Ave Hershey, PA 17033	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				
T	W. Whele Tragenas				

Evidence of insurance with respects to the Washington Township Parks and Recreation Youth Baseball Program.

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