

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/1/2025

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).

PRODUCER		CONTACT MMA - Bouchard Insurance				
Marsh & McClennan (CLW) 101 N Starcrest DR			FAX (A/C, No): 727-449	o): 727 - 449-1267		
Clearwater FL 33765		E-MAIL ADDRESS: CertsTeam@MarshMMA.com				
		INSURER(S) AFFORDING COVERAGE		NAIC#		
		INSURER A: National Union Fire Ins Co of Pittsburg		19445		
INSURED	EASTLAKE2	ınsurer в : Florida Insurance Alliance		99999		
East Lake Tarpon Special Fire 3375 Tarpon Lake Blvd	Control district	INSURER C:				
Palm Harbor FL 34685		INSURER D:				
		INSURER E:				
		INSURER F:				
COVERACES	OFFICIOATE NUMBER 040075070	DEVICION NUM	4050			

COVERAGES CERTIFICATE NUMBER: 943975272 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	NSR LTR TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
Α	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	Y		VFNUTR002318505	10/1/2025	10/1/2026	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 1,000,000
	X ₀						MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$3,000,000
	X POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$3,000,000
	OTHER:							\$
Α	AUTOMOBILE LIABILITY	Υ		VFNUTR002318505	10/1/2025	10/1/2026	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	\$
	X HIRED X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
								\$
Α	UMBRELLA LIAB X OCCUR	Υ		VFNUTR002318505	10/1/2025	10/1/2026	EACH OCCURRENCE	\$ 1,000,000
	X EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 2,000,000
	DED X RETENTION \$ 0							\$
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC1001255002	10/1/2025	10/1/2026	X PER OTH- STATUTE ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE N	N/A					E.L. EACH ACCIDENT	\$1,000,000
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

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

Certificate Holder is an additional insured with respects to General Liability, Automobile Liability, and Excess Liability, if required by written contract, subject to the terms, conditions and exclusions as specified in the policy.

ICELLATION
V

Pinellas County A Political Subdivision of the State of Florida 400 South Fort Harrison Avenue Clearwater FL 33756-0000 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

© 1988-2015 ACORD CORPORATION. All rights reserved.