

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/11/2025

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.

If S	JBROGATION IS WAIVED, subject to certificate does not confer rights to	the te	erms and conditions of the poli ertificate holder in lieu of such	icy, certain po endorsement	olicies		•		
PRODU	CER			CONTACT Car	ndace Z	Zubee			
ARCV	Leavitt Insurance Services	PHONE (A/C, No, Ext): (727) 544-8841 FAX (A/C, No): (727) 544-8842				544-8842			
9067 I	Belcher Road	E-MAIL candace-zubee@leavitt.com							
					INS	URER(S) AFFOR	DING COVERAGE		NAIC #
Pinella	Pinellas Park FL 33782			INSURER A: National Union Fire Insurance Company of Pittsburgh, Pa.				19445	
INSURED				INSURER B:					
Lealman Special Fire Control District				INSURER C:					
4360 55th Avenue North				INSURER D:					
				INSURER E :					
	St. Petersburg		FL 33714	INSURER F:					
COVERAGES CERTIFICATE NUMBER: CL2551512900 REVISION NUMBER:									
INDI CER	S IS TO CERTIFY THAT THE POLICIES OF ICATED. NOTWITHSTANDING ANY REQUITIFICATE MAY BE ISSUED OR MAY PERTALUSIONS AND CONDITIONS OF SUCH PO	REMEN AIN, TH	NT, TERM OR CONDITION OF ANY C HE INSURANCE AFFORDED BY THE	CONTRACT OR O	OTHER CRIBED	DOCUMENT VOLUMENT VOLUMENT V	WITH RESPECT TO WI	HICH THIS	
INSR LTR	TYPE OF INSURANCE	ADDL S		POLICY (MM/DD/		POLICY EXP (MM/DD/YYYY)		LIMITS	
>	COMMERCIAL GENERAL LIABILITY			,			EACH OCCURRENCE	\$ 1,00	0,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence	ce) \$	

			11100	11110		(1011011/12/20)	(141141,00,1111)		
	X	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$ 1,000,000
		CLAIMS-MADE OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
								MED EXP (Any one person)	\$ 5,000
Α					VFNUTR001278105	05/30/2025	05/30/2026	PERSONAL & ADV INJURY	\$ 1,000,000
	GEN	I'L AGGRE <u>GATE</u> LIMIT APP <u>LIES</u> PER:						GENERAL AGGREGATE	\$ 2,000,000
	×	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000
		OTHER:							\$
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	×	ANY AUTO						BODILY INJURY (Per person)	\$
Α		OWNED SCHEDULED AUTOS ONLY AUTOS			VFNUTR001278105	05/30/2025	05/30/2026	BODILY INJURY (Per accident)	\$
	×	AUTOS ONLY  NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
									\$
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$ 2,000,000
Α	×	EXCESS LIAB CLAIMS-MADE			VFNUTR001278105	05/30/2025	05/30/2026	AGGREGATE	\$ 4,000,000
		DED RETENTION \$							\$
	_	KERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A					E.L. EACH ACCIDENT	\$
			,					E.L. DISEASE - EA EMPLOYEE	\$
		s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
	Ma	nagement Liability						Each Occurrence	\$1,000,000
Α	Management Liability		TIOTIC ELGOIILLY		VFNUTR001278105	05/30/2025	05/30/2026	General Aggregate	\$2,000,000
DES	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)								

CERTIFICATE HOLDER		CANCELLATION	
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Pinellas County, a Political Subdivision of the State of Florida 400 South Fort Harrison Ave Clearwater FL 33756 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