

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/28/2023

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 NAME: Jenna Jennings					
World Risk Management					PHONE (A/C, No, Ext): 4074452414 (A/C, No): 407-445-2868						
20 N. Orange Ave., Suite 500					(A/C, No. EXI): 401-440-2414 [(A/C, No.): 401-440-2000 E-MAIL ADDRESS: jenna.jennings@wrmllc.com						
Orlando FL 32801					INSURER(S) AFFORDING COVERAGE				NAIC#		
					INSURER A: Public Risk Management of FL (11111		
NOUTE SOLITORS OF						INSURER B:					
City of South Pasadena						INSURER C:					
7047 Sunset Drive South South Pasadena FL 33707-2895					INSURER D:						
2000 T 40000 T 2000					INSURER E :						
						INSURER F:					
COVERAGES CERTIFICATE NUMBER: 2028637491						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	R TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
Α				PRM023-010-024		10/1/2023	10/1/2024		\$ 2,000	000	
	CLAIMS-MADE X OCCUR	AIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 2,000	000	
					1			Manager Aller and the second s	\$ EXCL	UDED	
								PERSONAL & ADV INJURY	\$ 2,000	000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$		
	POLICY PRO- JECT LOC	LICY PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$			
OTHER:									\$		
Α	AUTOMOBILE LIABILITY			PRM023-010-024	1	10/1/2023	10/1/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 2,000	,000	
	X ANY AUTO			2				BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS ONLY								\$		
	X HIRED X NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	X _{APD}							APD DEDUCTIBLE	\$ 1,000		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$								\$		
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			PRM023-010-024	10/1/2023		10/1/2024	X PER STATUTE OTH-			
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	NER/EXECUTIVE [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	
	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	CORD	101, Additional Remarks Schedu	ile, may b	e attached if mor	e space is requir	ed)			
RE: ALS License Renewal With respects to the listed coverage held by the named insured, as evidence of insurance.											
Per the Attorney General's Opinion, as Per FL Statute 768.28, governmental entities may not add another party as an additional insured.											
CERTIFICATE HOLDER						CANCELLATION					
Florida Department of Health Emergency Medical Services 4052 Bald Cypress Way						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
Tallahassee FL 32399-1738					AUTHORIZED REPRESENTATIVE						
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