

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/14/2022

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:					
Next First Insurance Agency, Inc.						NAME: PHONE (A/C, No, Ext): (855) 222-5919 (A/C, No, Ext): (855) 222-5919					
PO Box 60787 Palo Alto, CA 94306					E-MAIL support@nextinsurance.com						
1 410 / 11.0, C/1 3-300					INSURER(S) AFFORDING COVERAGE NAIC #						
						INSURER A: State National Insurance Company, Inc.				12831	
INSURED						TO STATE OF THE ST				12031	
III OUNCE					INSURER B:						
DJ Sound Productions Entertainment 808 8th Ave N					INSURER C:						
Princeton, MN 55371					INSURER D:						
					INSURER E :						
COVEDACES CERTIFICATE MUMAPER. 249400421						INSURER F:					
COVERAGES CERTIFICATE NUMBER: 368699421 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 INSR ADDL SUBR						DOLICY EEE DOLICY EYE					
INSR LTR			WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT			
	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE DAMAGE TO RENTED	+ /	0,000.00	
	CLAIMS-MADE X OCCUR							PREMISES (Ea occurrence) \$1		00.00	
								MED EXP (Any one person)	\$15,00	0.00	
Α				NXTLH8PMOM-02-GL		07/11/2022	07/11/2023	PERSONAL & ADV INJURY	\$1,000	0,000.00	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE		0,000.00	
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG		0,000.00	
	OTHER:							COMBINED SINGLE LIMIT	\$		
	AUTOMOBILE LIABILITY							(Ea accident)	\$		
	ANY AUTO							BODILY INJURY (Per person)	\$		
	OWNED AUTOS ONLY AUTOS NON-OWNED							BODILY INJURY (Per accident)	\$		
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
									\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADI							AGGREGATE	\$		
	DED RETENTION\$							DED	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							PER OTH- STATUTE ER			
ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		N/A						E.L. EACH ACCIDENT	\$		
(Mandatory in NH) If yes, describe under								E.L. DISEASE - EA EMPLOYEE	\$		
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	ACORD	101, Additional Remarks Schedu	le, may be	e attached if mor	e space is require	ed)			
Pro	Proof of Insurance.										
CERTIFICATE HOLDER C						CANCELLATION					
DI Sound Productions Entertainment						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					
Princeton, MN 55371											
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