



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/20/2014

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).

PRODUCER FRANCIS L. DEAN AND ASSOCIATES, LLC 1776 S. NAPERVILLE ROAD, BLDG-B P.O. BOX 4200 WHEATON, IL 60189 www.fdean.com 800-745-2409	CONTACT NAME: PHONE (A/C, No, Ext): 800-745-2409 FAX (A/C, No): 630-665-7294 E-MAIL ADDRESS: info@fdean.com	
	INSURER(S) AFFORDING COVERAGE NAIC #	
	INSURER A : United States Fire Insurance Company 21113	
	INSURER B :	
	INSURER C :	
	INSURER D :	
INSURER E :		
INSURER F :		

INSURED SPORTS AND RECREATION PROVIDERS ASSOCIATION (PURCHASING GROUP) AND ITS PARTICIPATING MEMBERS:

ENVISION PERFORMING ARTS
10580 N McCarran Blvd. #115-122
Reno, NV 89503

COVERAGES **CERTIFICATE NUMBER:** USP164775 **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	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY	X		SRPGP-101-0414	12/01/2014 12:00 AM	12/01/2015 12:01 AM	GENERAL AGGREGATE	\$2,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG	\$2,000,000.00
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY	\$1,000,000.00
							EACH OCCURRENCE	\$1,000,000.00
							FIRE DAMAGE (Any one fire)	\$300,000.00
							MED EXP (Any one person)	\$0.00
GEN'L AGGREGATE LIMIT APPLIES PER:								
<input checked="" type="checkbox"/>	POLICY	<input type="checkbox"/>	PRO-JECT	<input type="checkbox"/>	LOC		\$	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/>	SCHEDULED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> HIRED AUTO	<input type="checkbox"/>	NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB						EACH OCCURRENCE	\$
	EXCESS LIAB						AGGREGATE	\$
	DED		RETENTION \$					\$
							EACH OCCURRENCE	\$
							GENERAL AGGREGATE	\$
	GL Premium:							\$335.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Winter Guard

CERTIFICATE HOLDER	CANCELLATION
ENVISION PERFORMING ARTS 10580 N McCarran Blvd. #115-122 Reno, NV 89503	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 Francis L. Dean



ADDITIONAL INTEREST SCHEDULE

DATE (MM/DD/YYYY)
10/20/2014

AGENCY		CARRIER United States Fire Insurance Company		NAIC CODE 21113
POLICY NUMBER SRPGP-101-0414/USP164775		EFFECTIVE DATE 12/01/2014	NAMED INSURED(S) ENVISION PERFORMING ARTS	

ADDITIONAL INTEREST (Not all fields apply to all scenarios – provide only the necessary data)

INTEREST	NAME AND ADDRESS	RANK:	EVIDENCE:	CERTIFICATE	POLICY	SEND BILL	INTEREST IN ITEM NUMBER	
<input checked="" type="checkbox"/> ADDITIONAL INSURED <input type="checkbox"/> BEACH OF WARRANTY <input type="checkbox"/> CO-OWNER <input type="checkbox"/> EMPLOYEE AS LESSOR <input type="checkbox"/> LEASEBACK OWNER <input type="checkbox"/> LIENHOLDER	LOSS PAYEE MORTGAGEE OWNER REGISTRANT TRUSTEE	Winter Guard International / WGI Sport Of The Arts					LOCATION:	BUILDING:
		2405 Crosspointe Drive					VEHICLE:	BOAT:
		Dayton, OH 45342					AIRPORT:	AIRCRAFT:
		REFERENCE / LOAN #:		INTEREST END DATE:			ITEM CLASS:	ITEM:
		LIEN AMOUNT:		PHONE (A/C, No, Ex):			ITEM DESCRIPTION	
		REASON FOR INTEREST:		E-MAIL ADDRESS:			FAX (A/C, No):	

INTEREST	NAME AND ADDRESS	RANK:	EVIDENCE:	CERTIFICATE	POLICY	SEND BILL	INTEREST IN ITEM NUMBER	
<input checked="" type="checkbox"/> ADDITIONAL INSURED <input type="checkbox"/> BEACH OF WARRANTY <input type="checkbox"/> CO-OWNER <input type="checkbox"/> EMPLOYEE AS LESSOR <input type="checkbox"/> LEASEBACK OWNER <input type="checkbox"/> LIENHOLDER	LOSS PAYEE MORTGAGEE OWNER REGISTRANT TRUSTEE	Artown					LOCATION:	BUILDING:
		300 East Second Street Suite 1000					VEHICLE:	BOAT:
		Reno, NV 89501					AIRPORT:	AIRCRAFT:
		REFERENCE / LOAN #:		INTEREST END DATE:			ITEM CLASS:	ITEM:
		LIEN AMOUNT:		PHONE (A/C, No, Ex):			ITEM DESCRIPTION	
		REASON FOR INTEREST:		E-MAIL ADDRESS:			FAX (A/C, No):	

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		1664 North Virginia Street					VEHICLE:	BOAT:
		Reno, NV 89557					AIRPORT:	AIRCRAFT:
		REFERENCE / LOAN #:		INTEREST END DATE:			ITEM CLASS:	ITEM:
		LIEN AMOUNT:		PHONE (A/C, No, Ex):			ITEM DESCRIPTION	
		REASON FOR INTEREST:		E-MAIL ADDRESS:			FAX (A/C, No):	

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		2680 East 9th Street					VEHICLE:	BOAT:
		Reno, NV 89512					AIRPORT:	AIRCRAFT:
		REFERENCE / LOAN #:		INTEREST END DATE:			ITEM CLASS:	ITEM:
		LIEN AMOUNT:		PHONE (A/C, No, Ex):			ITEM DESCRIPTION	
		REASON FOR INTEREST:		E-MAIL ADDRESS:			FAX (A/C, No):	

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		425 East Ninth Street					VEHICLE:	BOAT:
		Reno, NV 89520					AIRPORT:	AIRCRAFT:
		REFERENCE / LOAN #:		INTEREST END DATE:			ITEM CLASS:	ITEM:
		LIEN AMOUNT:		PHONE (A/C, No, Ex):			ITEM DESCRIPTION	
		REASON FOR INTEREST:		E-MAIL ADDRESS:			FAX (A/C, No):	

The above are added as additional insured but only with respect to liability arising out of operations of the named insured during the policy period.