

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)	
8/28/2022	

POSIINC-01

						8/	/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 License # 0L72977					ent			
Legacy Risk & Insurance Services				(005)	400 4004			
1850 Mt. Diablo Blvd., Suite 400	PHONE (A/C, No, Ext): (925) 4	482-1000 teo@logoo		(925)	482-1001			
Walnut Creek, CA 94596	E-MAIL ADDRESS: Certificat				1			
						NAIC #		
			INSURER A : Houston Casualty Co 423					
INSURED	INSURER B : Everes	10120						
PosiGen Developer, LLC ; Po related entities	osiGen	Inc.; PosiGen LLC; and	INSURER C : Crum & Forster Indemnity Company				31348	
145 James Dr. E, Suite 300			INSURER D : RSUI Indemnity Company				22314	
Saint Rose, LA 70087			INSURER E : Lloyd's	of London				
			INSURER F :					
COVERAGES CER	TIFICA	TE NUMBER:			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	ADDL SU	IBR	POLICY EFF	POLICY EXP	LIMIT	· e		
A X COMMERCIAL GENERAL LIABILITY	INSD W		(MM/DD/YYYY)	(MM/DD/YYYY)			1,000,000	
CLAIMS-MADE X OCCUR		SO234884001	7/1/2023	7/1/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000	
		50234884001	111/2023	//1/2024		\$	10,000	
					MED EXP (Any one person)	\$	1,000,000	
					PERSONAL & ADV INJURY	\$		
GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	2,000,000	
X POLICY PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$	2,000,000	
OTHER:					DRONE LIABILITY	\$	5,000,000	
B AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
X ANY AUTO		CF2CA00182231	7/1/2023	7/1/2024	BODILY INJURY (Per person)	\$		
OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$		
HIRED AUTOS ONLY NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$		
						\$		
UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$		
EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$		
					AGOREGATE			
C WORKERS COMPENSATION					X PER OTH- STATUTE ER	\$		
AND EMPLOYERS' LIABILITY		4087447245	3/1/2023	3/1/2024			1,000,000	
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N / A		••••••••••		E.L. EACH ACCIDENT	\$	1,000,000	
If ves, describe under					E.L. DISEASE - EA EMPLOYEE		1,000,000	
DESCRIPTION OF OPERATIONS below		NHA103422	7/1/2023	7/1/2024	E.L. DISEASE - POLICY LIMIT	\$	2,000,000	
					-			
E Cargo/Property		MCFAL10000722	7/1/2023	7/1/2024	Any One Transit		200,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)								
Cargo/Property Deductible: \$2,500 any one claim in the course of transit								
Evidence of insurance								

CERTIFICATE HOLDER	CANCELLATION
Evidence of Insurance	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
	DB

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