

Proposal No. 2018M-013EN-001



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
03/09/2018

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).

<b>PRODUCER</b> GARY MAXWELL INSURANCE AGENCY, LLC 1283 S. WALNUT AVE. P.O. BOX 3307 COOKEVILLE, TN 38502		<b>CONTACT NAME:</b> PHONE (A/C. No. Ext.): (931)528-0474      FAX (A/C. No.): (931)528-0414 E-MAIL ADDRESS:	
<b>INSURED</b> MARKET STREET MERCANTILE LLC 111 2ND AVE NORTH NASHVILLE, TN 37201		<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: Grange Mutual Insurance      NAIC # INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

**COVERAGES**      **CERTIFICATE 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.

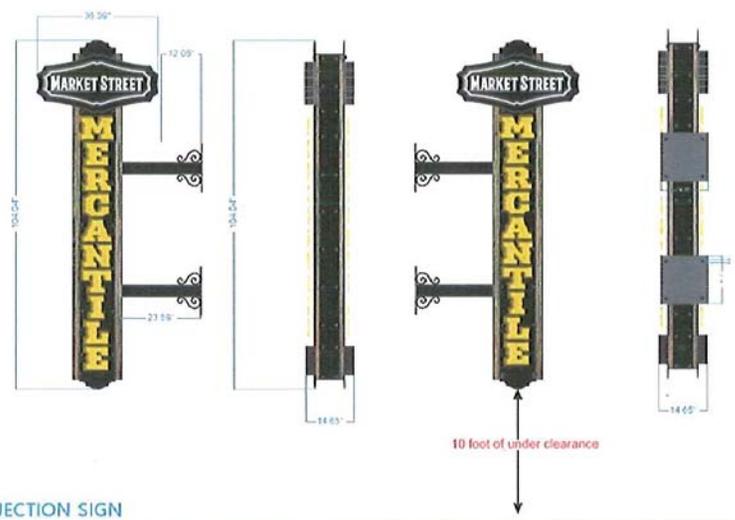
INSR LTR	TYPE OF INSURANCE	ADDITIONAL INSURED	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	X	BP2056316	11/6/2017	11/6/2018	EACH OCCURRENCE \$ 2000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 2000000 GENERAL AGGREGATE \$ 4000000 PRODUCTS - COM/POP AGG \$ 4000000 \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ EACH OCCURRENCE \$ AGGREGATE \$ \$ PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 RE: 111 2ND AVE N, NASHVILLE, TN 37201. IT IS AGREED AND UNDERSTOOD THAT THE METRO GOVT OF NASHVILLE CT, METRO LEGAL & CLAIMS C/O INSURANCE & SAFETY DIVISION 222 3RD AVE NORTH SUITE #501, NASHVILLE, TN 37201 IS INCLUDED AS ADDITIONAL INSURED PER FORM BP 04 07 (ATTACHED)

<b>CERTIFICATE HOLDER</b>  THE METRO GOVT OF NASHVILLE & DAVIDSON CO, METRO LEGAL & CLAIMS C/O INSURANCE AND SAFETY DIVISION 222 3RD AVE NORTH SUITE #501 NASHVILLE, TN 37201	<b>CANCELLATION</b>  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 
---	--

Existing "Jack Daniels" shingle signs to be removed

- MH2C INSPECTIONS & FINAL APPROVALS**  
**CALL 862-7970 FOR QUESTIONS AND TO SCHEDULE INSPECTIONS**
- Sign will be a minimum of 1' from the face of the building and will not exceed a total of 6' of projection.
  - There is no blinking, chasing, flashing or sequential lighting.
  - Sign is at least 25' from the nearest projecting sign.
  - Sign will not be more than 18" if it includes neon or internal lighting or 2" if it does not.
  - Sign shall not have any moving or spinning parts.
  - Sign must be inspected by MH2C staff prior to installation



**PROJECTION SIGN**

- Projection sign with white and gold neon accents
- Double-sided
- Store frontage is 28 feet wide giving the client 56 Allowable square feet of signage. This sign is 34 square feet
- The sign has 10 feet of underclearance
- The sign meets the 12 inches of clearance between the sign and the support wall
- The sign does not flash or blink

Building frontage: 21.5'  
 Sign allotment: 41sq ft  
 Existing wall sign: 3sq ft  
 This projecting sign: 34sq ft  
 Remaining allotment: 4sq ft



Existing shingle signs to be removed



Existing shingle signs to be removed

- MHZC INSPECTIONS & FINAL APPROVALS**  
**CALL 862-7970 FOR QUESTIONS AND TO SCHEDULE INSPECTIONS**
- Sign will be a minimum of 1' from the face of the building and will not exceed a total of 6' of projection.
  - There is no blinking, chasing, flashing or sequential lighting.
  - Sign is at least 25' from the nearest projecting sign.
  - Sign will not be more than 18" if it includes neon or internal lighting or 2" if it does not.
  - Sign shall not have any moving or spinning parts.
  - Sign must be inspected by MHZC staff prior to installation

2200 DUNN AVE. NASHVILLE, TN 37211 (615) 265-2825

# SIGN ME UP

NAME	BRUCE BE
ADDRESS	
PHONE	Wendell Mercantile
EMAIL	wend@mercantile.com
WEBSITE	www.mercantile.com
OTHER CONTACT	
DATE	
TIME	