

Proposal No. 2019M-011EN-001



HYDRNAS-01

TCHAMPION

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/07/2018

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).

PRODUCER Fitts Agency Inc. 1806 6th Street Tuscaloosa, AL 35401	CONTACT Tancy Champion, CISR PHONE: (205) 342-3554 FAX: (205) 342-3467 EMAIL: tchampion@fittsagency.com ADDRESS:
INSURED Hydrallive Nashville, LLC P.O. Box 58313 Homewood, AL 35259	INSURER(S) AFFORDING COVERAGE INSURER A: Evanston Insurance Company NAIC # 35378 INSURER B: Liberty Mutual Group INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

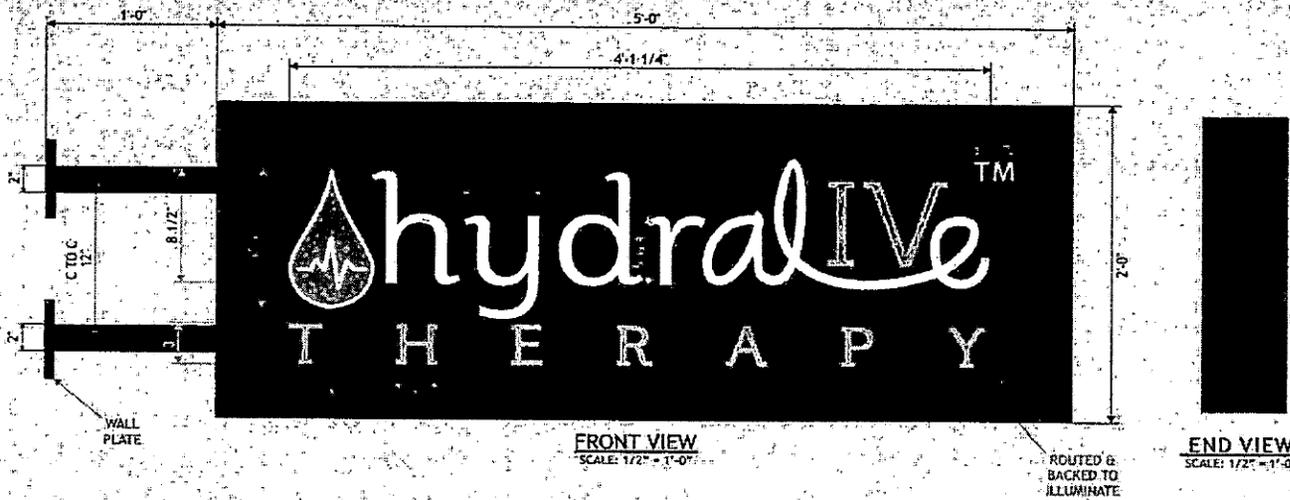
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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.

INSTR. LTR.	TYPE OF INSURANCE	ADDITIONAL INSURED	POLICY NUMBER	POLICY EFF. DATE (MM/DD/YYYY)	POLICY EXP. DATE (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PER. <input type="checkbox"/> LOC OTHER:	X	SM928887	12/06/2018	12/08/2019	EACH OCCURRENCE \$ 100,000 DAMAGE TO RENTED PREMISES (Ea. occurrence) \$ 50,000 MED. EXP. (Any one person) \$ 5,000 PERSONAL & ADV. INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP. AGG. \$ 1,000,000 PROFESSIONAL \$ 1,000,000
	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS HIRED AUTO ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea. accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$ 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 TN) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A			PER. STATUTE <input type="checkbox"/> OTH. \$ EL. EACH ACCIDENT \$ EL. DISEASE - EA EMPLOYEE \$ EL. DISEASE - POLICY LIMIT \$
B	Sign Coverage		BFS(19) 59377515	12/06/2018	12/06/2019	Limit 10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Re: Sign for Hydrallive Nashville, LLC
 The Metropolitan Government of Nashville & Davidson County, Metro Legal and Claims & Insurance and safety Division is included as additional insured as required by written contract. A 30 day notice of cancellation applies. Sign Coverage \$10,000

CERTIFICATE HOLDER The Metropolitan Government of Nashville and Davidson County Metro Legal and Claims 222 3rd Ave N, Ste. 501 Nashville, TN 37201	CANCELLATION 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
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OPTION B ROUTED & BACKED



(N0251283.1)

HYDRALIVE THERAPY
 212 BROADWAY- 4TH FLOOR
 NASHVILLE, TN 37201
 PROJECT MGR: D.LUTHER
 181192-L30-02

SPECIFICATIONS & FINISHES

1. FABRICATE/INSTALL TWO (2) DF LED-ILLUMINATED CABINET SIGN WITH ROUTED AND BACKED COPY, AS ILLUSTRATED AND SPECIFIED.

WHITE #7328 PMS 2985 C (RAL 9010-107 FLUO, RLUT) PMS 280 C

DATE: 11-06-18 J. MORTON
 XXXXX
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APPROVALS
 FOR ARCHITECT/ENGINEER
 ENGINEERING:
 INSTALLATION:
 PROJECT MANAGER:

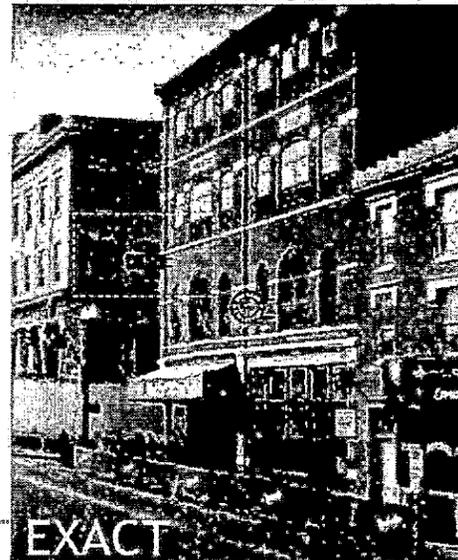
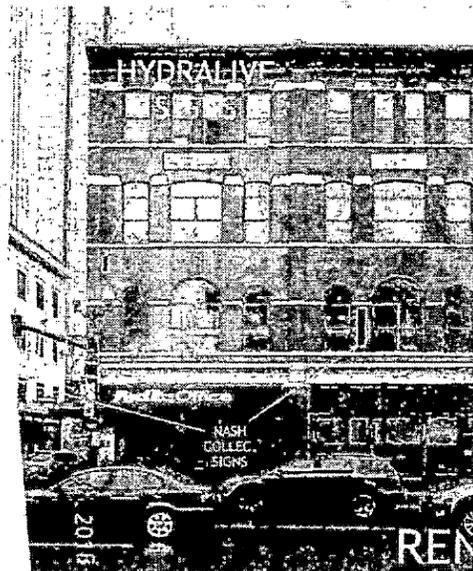
JOSLIN AND SON SIGNS
 636 McFreesboro Rd, Nashville, TN 37216
 615-255-5402 1-800-545-9557

*Design & Drawing Are Property Of Joslin Signs. Use Without Consent Is Subject To Invoicing And/or Litigation

NOTE: WILL NOT BE ABLE TO INSTALL IN A CORNER,
WILL HAVE TO BE ABLE TO THROUGH BOLT

SIGN #1 PLACEMENT

SIGN #2 PLACEMENT



RENDERING SCALES NOT EXACT

HYDRALIVE THERAPY
212 BROADWAY- 4TH FLOOR
NASHVILLE, TN 37201
PROJECT MGR: D. LUTHER
181192-L30-02

SPECIFICATIONS & FINISHES
PHOTO RENDERINGS

DATE: 11-08-16 J. MORTON
XXXXXX
PAGE 2 OF 2

APPROVALS FOR INSTALLATION:
ENGINEERING:
INSTALLATION:
PROJECT MANAGER:

JOSLIN AND SON SIGNS
830 Murfreesboro Rd. Nashville, TN 37210
615.255.2463 1.800.645.9597

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(N0251283.1)