

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).

<b>PRODUCER</b> <b>Chappell Insurance Agency</b> <b>25807A Cox Road</b> <b>Petersburg, VA, 23803</b>		<b>CONTACT NAME:</b> Daryl Chappell <b>PHONE (A/C, No. Ext):</b> 804-733-2020 <b>FAX (A/C, No):</b> 804-733-2968 <b>E-MAIL ADDRESS:</b> support@chappellinsurance.com	
<b>INSURED</b> <b>Lakewood Junior Baseball Association</b> <b>1305 Brentwood St</b> <b>Lakewood, CO 80214</b>  <b>(1)Teams in Lakewood Junior Baseball Association group</b>		<b>INSURER(S) AFFORDING COVERAGE</b> <b>NAIC #</b> INSURER A: Nationwide Mutual Insurance Company      23787 INSURER B: Hartford Life and Accident Company      70815 INSURER C: INSURER D: INSURER E: INSURER F:	


COVERAGES      CERTIFICATE NUMBER: **RPG-BB-11-001222**      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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  <input checked="" type="checkbox"/> PLL - \$2 million  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER:	X		RPG315507-00	01/01/2021 12:01 AM	01/01/2022 12:01 AM	EACH OCCURRENCE	2,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence)						1,000,000	
	MED EXP (Any one person)							
	PERSONAL & ADV INJURY						2,000,000	
	GENERAL AGGREGATE	5,000,000					PRODUCTS-COMP/OP AGG	2,000,000
							PARTICIPANT LEGAL LIABILITY	2,000,000
	UMBRELLA LIAB      OCCUR EXCESS LIAB      CLAIMS-MADE DED      RETENTION						EACH OCCURRENCE	
							AGGREGATE	
B	PARTICIPANT ACCIDENT			36-SB-206413	01/01/2021 12:01 AM	01/01/2022 12:01 AM	EXCESS MEDICAL	100,000
							DEDUCTIBLE	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Coverage includes amateur play and practice in the insured sport for Lakewood Junior Baseball Association RPG-BB-11-001222. The certificate holder is named as an additional insured but only with respect to the operations of the named insured.

**Coverage Effective From 01:30 PM on 01/10/2021 TO 01/01/2022**

<b>CERTIFICATE HOLDER</b>  Gold Crown Foundation Coca Cola 200 S Harlan Lakewood, CO 80226  Certificate Number: RPG-BB-11-001222	<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  
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