Client#: 1887903 CITYMAP

ACORD...

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/03/2024

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 any rights to the certificate holder in lieu of such endorsement(s).

| , , | | () | | | | | |
|--|----------------------------|---|-----|---------|--|--|--|
| PRODUCER | | CONTACT Janelle M. Darling | | | | | |
| USI Insurance Services, LLC 8000 Norman Center Dr, Suite 400 Bloomington, MN 55437 612 509-1001 | | PHONE (A/C, No, Ext): 952-322-9046 FAX (A/C, No): | | 45-9477 | | | |
| | | E-MAIL ADDRESS: Janelle.Darling@usi.com | | | | | |
| | | INSURER(S) AFFORDING COVER | AGE | NAIC# | | | |
| | | INSURER A: League of MN Cities Insurance Trust | | 99999 | | | |
| INSURED | | INSURER B: | | | | | |
| City of Maple Grove | | INSURER C: | | | | | |
| 12800 Arbor Lakes Parkwa | • | INSURER D: | | | | | |
| Maple Grove, MN 55369-7 | Maple Grove, MN 55369-7064 | 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 | ADDL: | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | |
|-------------|------|---|-------|-------------|---------------|----------------------------|----------------------------|---|-------------|
| Α | X | COMMERCIAL GENERAL LIABILITY | | | CMC10019268 | | 03/31/2025 | | \$2,000,000 |
| | | X CLAIMS-MADE OCCUR | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ |
| | X | 150,000 | | | | | | MED EXP (Any one person) | \$2,500 |
| | | | | | | | | PERSONAL & ADV INJURY | \$ |
| | GEN | I'L AGGREGATE LIMIT APPLIES PER: | | | | | | GENERAL AGGREGATE | \$ |
| | | POLICY PRO- JECT LOC | | | | | | PRODUCTS - COMP/OP AGG | \$3,000,000 |
| | | OTHER: | | | | | | | \$ |
| Α | AU1 | OMOBILE LIABILITY | | | CMC10019268 | 03/31/2024 | 03/31/2025 | COMBINED SINGLE LIMIT (Ea accident) | \$2,000,000 |
| | X | ANY AUTO | | | | | | BODILY INJURY (Per person) | \$ |
| | | OWNED SCHEDULED AUTOS | | | | | | BODILY INJURY (Per accident) | \$ |
| | X | HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY | | | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | X | Comp Ded 150k X Coll Ded 150k | | | | | | Hired AutoPD | \$Included |
| Α | | UMBRELLA LIAB OCCUR | | | MEL10019278 | 03/31/2024 | 03/31/2025 | EACH OCCURRENCE | \$5,000,000 |
| | X | EXCESS LIAB X CLAIMS-MADE | | | | | | AGGREGATE | \$5,000,000 |
| | | DED RETENTION \$ | | | | | | | \$ |
| Α | | RKERS COMPENSATION EMPLOYERS' LIABILITY | | | WC10019299 | 03/31/2024 | 03/31/2025 | X PER OTH- STATUTE ER | |
| | | PROPRIETOR/PARTNER/EXECUTIVE N | N/A | | | | | E.L. EACH ACCIDENT | \$ |
| | (Mai | ndatory in NH) | ,,, | | | | | E.L. DISEASE - EA EMPLOYEE | \$1,500,000 |
| | DES | s, describe under CRIPTION OF OPERATIONS below | | | | | | E.L. DISEASE - POLICY LIMIT | \$1,500,000 |
| Α | Мо | bile Property | | | CMC10019268 | 03/31/2024 | 03/31/2025 | Limit \$4,008,683 | |
| | | | | | | | | Deductible \$150,000 | |
| | | | | | | | | | |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

This Certificate is issued for insured operations usual to: MUNICIPALITY.

The general liability, automobile liability, and excess liability policies includes an automatic

Additional Insured endorsement that provides Additional Insured status to the Certificate holder, only when there is a written contract or written agreement between the named insured and the certificate holder that requires such status, and only with regard to the premises referenced above.

(See Attached Descriptions)

| CERTIFICATE HOLDER | CANCELLATION | | | |
|--|--|--|--|--|
| Department of Natural Resources Regional Fisheries Manager; 1200 Warner Road | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. | | | |
| St Paul, MN 55106 | AUTHORIZED REPRESENTATIVE | | | |
| 1 | Sept. | | | |

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| DESCRIPTIONS (Continued from Page 1) | | | | |
|---|--|--|--|--|
| The general liability, automobile liability, and excess liability policies provides a Blanket Waiver of Subrogation when required by written contract, except as prohibited by law. | | | | |
| RE: Project: Aerator in Rice Lake - Maple Grove, MN. Rice Lake Area Association is additional insured with respect to general liability when required by written contract. | | | | |
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