

Proposal No. 2017M-020EN-001





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/19/2017

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).

| | | | |
|---|--|--|--|
| PRODUCER The Manning Agency, LLC 104 Woodmont Blvd # 105 Nashville TN 37205-2290 | | CONTACT NAME: James Manning PHONE (A/C, No, Ext): (615)393-6700 FAX (A/C, No): (615)393-6823 E-MAIL ADDRESS: jp@themanningagency.com | |
| INSURED Thistle Farms, Inc. 5122 Charlotte Pike Nashville TN 37209-3347 | | INSURER(S) AFFORDING COVERAGE INSURER A: Philadelphia Ins Cos/tokio Marine INSURER B: National Liability & Fire Insurance INSURER C: INSURER D: INSURER E: INSURER F: | |

COVERAGES **CERTIFICATE NUMBER:CL1741900384** **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 INSD 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 GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | X | PHPK1444438 | 2/7/2017 | 2/7/2018 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea. occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 Professional Liability \$ 1,000,000 |
| A | AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS | | PHPK1444438 | 2/7/2017 | 2/7/2018 | COMBINED SINGLE LIMIT (Ea. accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000 |
| A | <input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000 | | PHUR528064 | 2/7/2017 | 2/7/2018 | EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ PER STATUTE OTH-ER |
| B | 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 | WC-2015-77380-00 | 1/1/2017 | 1/1/2018 | E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate Holder is included as an ADDITIONAL NAMED INSURED under the General Liability as required by written contract

RE: Sign for Thistle Farms 5122 Charlotte Pike Nashville, TN 37209

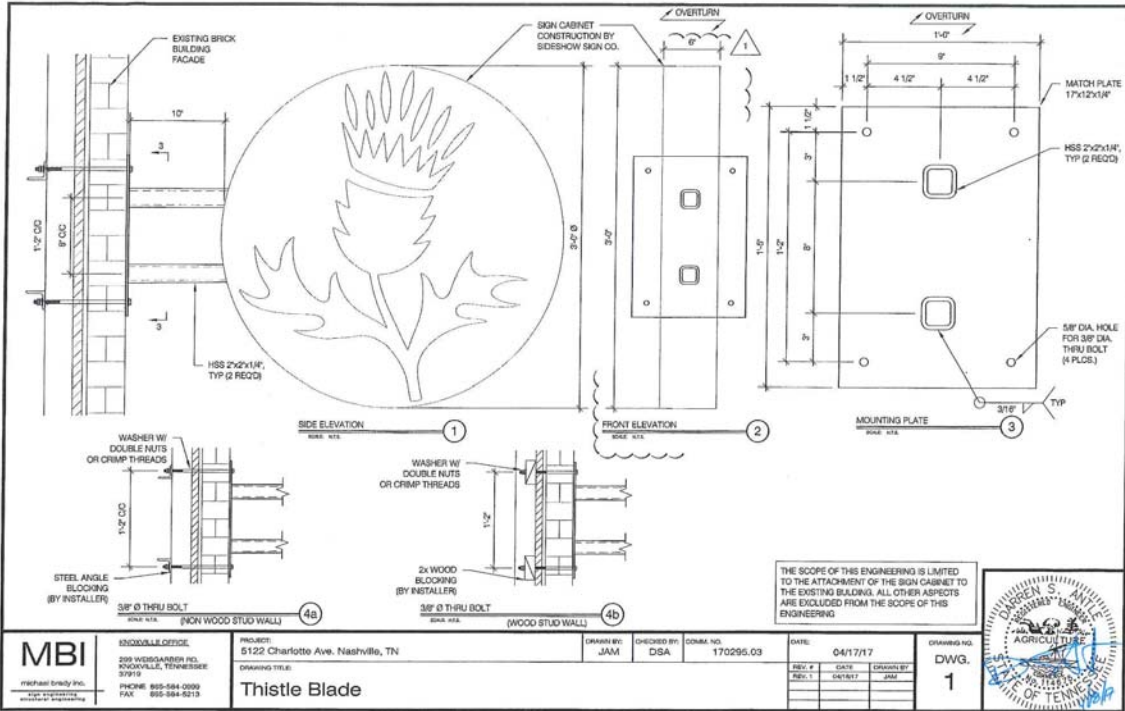
"The Metropolitan Government of Nashville and Davidson County" is included as an additional insurer in respects to General Liability.

| | |
|---|--|
| CERTIFICATE HOLDER Metropolitan Government Of Nashville and Davidson County Metro Legal and Claims 222 Third Ave N Ste 501 Nashville, TN 37210 | 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 James Manning/JPM |
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ACORD 25 (2014/01)
 INS025 (2014/01)

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MBI
 michael bready inc.
 ENGINEERS ARCHITECTS

ENGINEERING OFFICE
 209 WOODBURN HILL
 KNOXVILLE, TENNESSEE
 37919
 PHONE: 855-584-0500
 FAX: 855-584-8213

PROJECT:
 5122 Charlotte Ave. Nashville, TN
 DRAWING TITLE:
Thistle Blade

DRAWN BY:
 JAM
 CHECKED BY:
 DSA
 CONTA. NO.
 170295.03

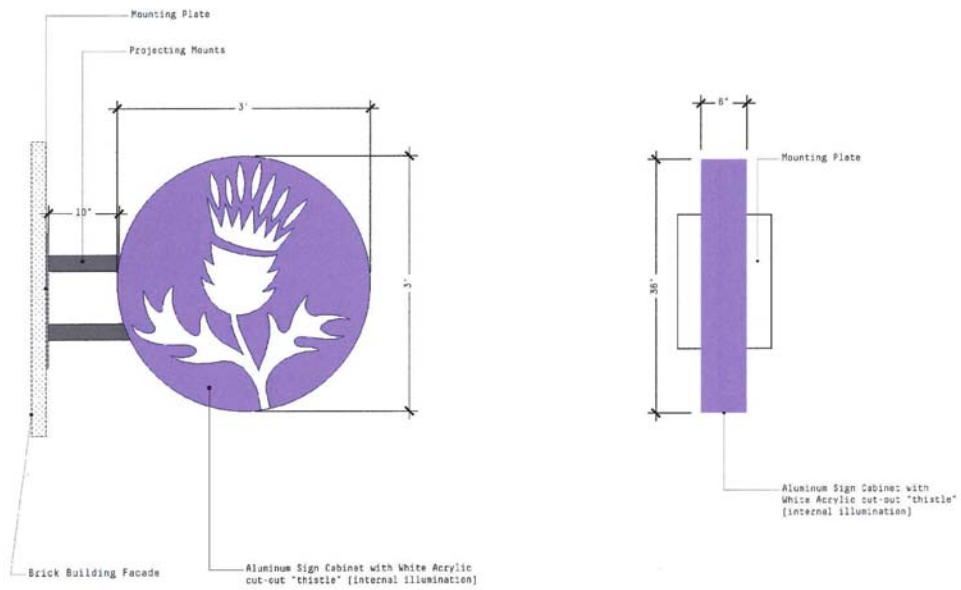
DATE:
 04/17/17
 DWG. NO.
1

DRAWING NO.
1

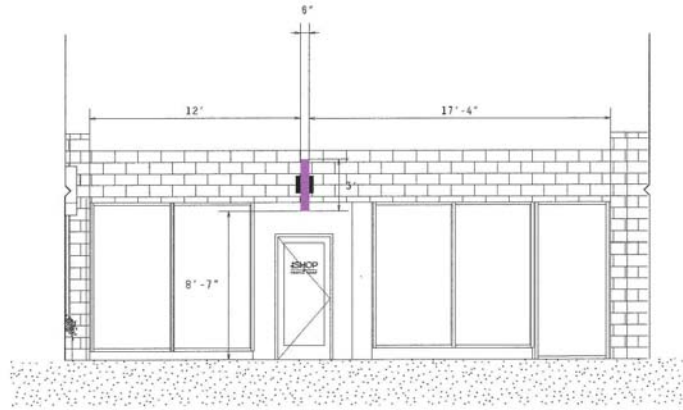


THE SCOPE OF THIS ENGINEERING IS LIMITED TO THE ATTACHMENT OF THE SIGN CABINET TO THE EXISTING BUILDING. ALL OTHER ASPECTS ARE EXCLUDED FROM THE SCOPE OF THIS ENGINEERING

INTERNALLY ILLUMINATED BLADE SIGN



SIGN PALCEMENT ON BUILDING FACADE



SOUTH ELEVATION
