

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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	e terms and conditions of the policy,	cert	ain p	olicies may require an e	ndorse	ment. A stat	ement on thi	s certificate does not con	fer rig	hts to the
certificate holder in lieu of such endorsement(s).					CONTACT Loretta Dearing					
PRODUCER I C Taylor Aconging										
J.C. Taylor Agencies revised					E-MAIL					
320 S. 69th St.					ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC #					NAIC#
Upper Darby, Pa. 19082				INSURERA: Foremost Ins. Co.						
THE PROPERTY OF THE PROPERTY O					Transfer (Charlet Charlet					
Classic Thunderbird Club International & all					INSURER B:					
its Regions & Chapters					INSURER C:					
1308 E. 29th St.					INSURER E :					
Signal Hill, CA 90755-1842					INSURER F:					
COVERAGES CERTIFICATE NUMBER:								REVISION NUMBER:		
	The second secon	05.	MOLIC	TANGE LICTED BELOW HA	VE BEE	N ISSUED TO	THE INSURE	D NAMED ABOVE FOR THE	POLIC	Y PERIOD
INI	IS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RE RTIFICATE MAY BE ISSUED OR MAY I CLUSIONS AND CONDITIONS OF SUCH	QUIF	REME	NT, TERM OR CONDITION THE INSURANCE AFFORD	ED BY	THE POLICIE REDUCED BY	S DESCRIBED PAID CLAIMS.	HEREIN IS SUBJECT TO		
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
LTR	GENERAL LIABILITY	INSR	WYVD	, odot nomedi				EACH OCCURRENCE \$		0,000.
A	X COMMERCIAL GENERAL LIABILITY			PPS12407799		4/19/17	9/24/17	1 (CIMIOCO LEG GOOD		0,000.
	CLAIMS-MADE X OCCUR	- T								00.
1	000000									00,000.
									2,00	0,000.
1 1	GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMPIOP AGG \$		0,000.
1	X POLICY PRO-									
	AUTOMOBILE LIABILITY							(Ea accident) S BODILY INJURY (Per person) \$		00,000.
	ANY AUTO ALL OWNED AUTOS X X X AUTOS X X X X X X X X X X X X X		PPS12407799					BODILY INJURY (Per parson) 5		20 \$20
1, [4/19/17	9/24/17	PROPERTY DAMAGE (Per acadent) 5			
A	X HIRED AUTOS X NON-OWNED AUTOS					F ** **		(Per accident) \$		
			-			//10/17	9/24/17	EACH OCCURRENCE \$	1,00	00,000.
A	X UMBRELLA LIAB X OCCUR			PPS12407799		4/19/1/	3/24/1/			00,000.
	EXCESS LIAB CLAIMS-MADE							AGGREGATE		
\vdash	DED RETENTION\$						WC STATU- OTH-			
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N								E.L. EACH ACCIDENT S		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICERMEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE S	S	
								E.L. DISEASE - POLICY LIMIT S		
\vdash	DESCRIPTION OF OPERATIONS below	_	-							
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)										
Hanover Marriott										
New Jersey Open CTCI Region 1 1401 Rt 10										
Road Thunderbird Convention Aug. 2-6, 2017 Whippany, NJ 07981										
Club Chapter										
overflow hotel :Residence Inn, Courtyard Marriott CANCELLATION										
CERTIFICATE HOLDER							:			
					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN					
Hanover Marriott						ACCORDANCE WITH THE POLICY PROVISIONS.				

© 1988-2010 ACORD CORPORATION. All rights reserved.

AUTHORIZED REPRESENTATIVE

1401 Rt 10

Whippany, NJ 07981



CERTIFICATE OF LIABILITY INSURANCE

DATE (MMIDDIYYYY)

6/12/17

CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONE! AND CONTERS NO MOTION OF THE CONTENT OF THE POPULATION ONE. THE COVERAGE AFFORDED BY THE POPULATION OF THE CONTENT OF THE ISSUING INSURER(S), AUTHORS REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.	ORIZED
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, su the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer right certificate holder in lieu of such endorsement(s).	bject to
PRODUCER CONTACT Loretta Dearing	1
J.C. Taylor Agencies revised PHONE (A/C, No. EXII): 800-272-6784 ext 340 FAX (A/C, No.):	24.4
320 S. 69th St.	
Upper Darby, Pa. 19082 INSURER(S) AFFORDING COVERAGE	NAIC #
INSURERA: Foremost Ins. Co.	*
INSURED INSURER B:	
Classic Thunderbird Club International & all INSURERC:	
its Regions & Chapters	
1308 E. 29th St. INSURERE:	
Signal Hill, CA 90755-1842 INSURER F:	
COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:	BERIOD

1300 21 -			CR C:					
Signal Hill, CA 90755-	ERF:							
COVERAGES		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.								
NSR TYPE OF INSURANCE INSR WYD POLICY NUMBER				POLICY EFF POLICY EXP LIMITS				
GENERAL LIABILITY A X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	1000	PPS124		4/19/17		EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person)	s1,0 s10,	000,000.
GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY JECT LOC						PERSONAL & ADVINJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	s2,0	000,000. 000,000. 000,000.
AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS AUTOS HIRED AUTOS		PPS12	407799	4/19/17	9/24/17	COMBINED SINGLE UMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$ \$ \$	000,000.
A X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-	MADE	PPS12	407799	4/19/17	9/24/17	AGGREGATE	s1,0	000,000.
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandabry In NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A		100			WC STATU- TORY LIMITS ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	\$	
			a.					
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If m New Jersey Open CTCI Region 1 Road Thunderbird Convention Aug. 2 Club Chapter					Ha: 2017 Whi	nover Marriott 401 Rt 10 ppany, NJ 0798	1	
CERTIFICATE HOLDER	CAN	CANCELLATION						
							ANICE	ED DEEOE

CERTIFICATE HOLDER	CANCELLATION			
Securitas 240 Cedar Knolls Rd., Suite 309 Cedar Knolls,NJ 07927	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			

© 1988-2010 ACORD CORPORATION. All rights reserved.