



**COMMERCIAL GENERAL LIABILITY COVERAGE PART – CLAIMS-MADE FORM
CERTIFICATE PAGE**

IT IS AGREED THAT THIS CERTIFICATE IS ISSUED TO THE CERTIFICATE HOLDER LISTED BELOW TO CERTIFY COVERAGE UNDER THE COMMERCIAL GENERAL LIABILITY INSURANCE MASTER POLICY LISTED BELOW.

INSURANCE COMPANY: Certain Underwriters at Lloyds NAME OF INSURED: Beauty Health & Trade Alliance CERTIFICATE HOLDER: Katie Lynn Cotaya, DBA Sit & Stay ADDRESS: 76 Hollycrest Blvd., Covington, LA 70433 POLICY PERIOD: 02/01/2019 to 02/01/2020 12:01 A.M. Standard Time at the Address of The Certificate Holder RETRO-DATE: 02/01/2019	POLICY NUMBER: JN1206 CERTIFICATE NUMBER: PCI20493
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LIMITS OF INSURANCE			
General Aggregate Limit (Other Than Products-Completed Operations)	\$	2,000,000	
Products-Completed Operations Aggregate Limit	\$	2,000,000	
Personal and Advertising Injury Limit	\$	1,000,000	
Each Occurrence Limit	\$	1,000,000	
Damage to Premises Rented To You Limit	\$	100,000	Any One Premises
Medical Expense Limit	\$	5,000	Any One Person
Animal Bailee – Animals In Your Care, Custody or Control	\$	5,000	Each Occurrence
	\$	10,000	Aggregate Limit
Veterinarian Expense Reimbursement	\$	1,000	Each Occurrence
	\$	5,000	Aggregate Limit
	\$	250	Deductible
Lost Key Liability Coverage	\$	2,000	Each Occurrence
	\$	2,000	Aggregate Limit

ADDITIONAL COVERAGE OPTIONS – Coverage Applies When Checked			
<input type="checkbox"/> Employee Coverage Elected		Included in LIMITS OF INSURANCE shown above	
<input checked="" type="checkbox"/> Independent Contractors Elected		Included in LIMITS OF INSURANCE shown above	
<input type="checkbox"/> Dog Training Coverage		Included in LIMITS OF INSURANCE shown above	
<input type="checkbox"/> House Sitting Coverage		Included in LIMITS OF INSURANCE shown above	
<input type="checkbox"/> Pet Daycare Coverage		Included in LIMITS OF INSURANCE shown above	
<input type="checkbox"/> Pet Groomers Professional Liability		Included in LIMITS OF INSURANCE shown above	
<input type="checkbox"/> Broadened Property Damage Coverage	\$	10,000	Each Occurrence
	\$	25,000	Aggregate Limit
<input type="checkbox"/> Employee Dishonesty (Bond)	\$	10,000	Each Occurrence
	\$	25,000	Aggregate Limit

FORMS AND ENDORSEMENTS applicable to all Coverage Parts and made part of this Policy at time of issue are listed on the attach Forms and Endorsements Schedule IL 88 01 (11/85).

TYPE OF BUSINESS: <input checked="" type="checkbox"/> Sole Proprietor/Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Other:		
Premium: \$95.00 BHTA Fee: \$54.39 SL Tax: \$4.61 Stamping Fee: \$0.00 TOTAL COST OF INSURANCE: \$154.00 (100% Earned/Non-Refundable) <i>Total Cost Includes Premiums, Taxes and Fees</i>	POLICY DEDUCTIBLE:	
BUSINESS DESCRIPTION: Pet Sitting , Dog Walker , Pooper Scooper , Other (baths & toenail trims while pet sitting, pet taxi, vet visits, medication administration)		

Mandatory Forms and Endorsement	
SLC-3	Lloyds Jacket
PC1110	Participation By Respective Contract
LSW1135B	Lloyds Privacy Policy Statement
IL0017 11/98	Common Policy Conditions
CG0002 04/13	Commercial General Liability - Claims-Made Form
PC1002	Claims Reporting
PC1004	Expense within Limits/Single Aggregate Limit
PC1005	Minimum Policy Premium
PC1007	Animal Bailee
PC1009	Dog Training - Exclusion
CG2158 07/98	Exclusion – Professional Veterinarian Services
PC1012	Assault & Battery Exclusion
PC1016	Miscellaneous Exclusion Endorsement
PC1017	Contractors Coverage Limitation
PC1018	Athletic or Sports Participants Exclusion
PC1019	Communicable Disease Exclusion
PC1020	Employment-Related Practices Exclusion
PC1021	Total Liquor and State Approved Recreational Liability Exclusion
PC1022	Limitation of Coverage to Business Description
PC1023	Lost Key Coverage Extension
PC1024	Exclusion – Injury to Any Temporary Workers, Volunteers, Casual Workers or Independent Contractors
PC1025	Veterinarian Expense Reimbursement
PC1026	Pet and Dog Breeding – Exclusion
PC1027	Extended Reporting Period
PC1028	Kennel(s) – Exclusion
PC1029	Who Is An Insured
PC1030	Employee and Independent Contractor Definition
PC1031	Claims Made and Reported Endorsement
LMA5020	Service of Suite
NMA1331	Cancellation Clause
CG2184 01/08	Exclusion of Certified Nuclear, Biological, Chemical or Radiological Acts of Terrorism
CG2149 09/99	Total Pollution Exclusion
VER001	Recording and Distribution of Material or Information in Violation of Law Exclusion
CG2106 05/14	Exclusion – Access or Disclosure of Confidential or Personal Information and Data-Related Liability

Optional Forms – Coverages Applies When Checked		
<input type="checkbox"/>	PC1008	Broadened Property Damage
<input type="checkbox"/>	PC1010	Employee Dishonesty
<input type="checkbox"/>	PC1013	House Sitting Exclusion
<input type="checkbox"/>	PC1014	Pet Daycare Operation Exclusion
<input type="checkbox"/>	PC1015	Pet Groomers Professional Liability
<input type="checkbox"/>	CG2026 04/13	Additional Insured – Designated Person or Organization
<input type="checkbox"/>	CG2001 04/13	Primary and Non-Contributory – Other Insurance Condition
<input type="checkbox"/>	CG2404 05/09	Waiver of Transfer of Rights of Recovery Against Other to Us
<input type="checkbox"/>	CG8802 11/85	Hired and Non-Owned Auto Liability

THIS INSURANCE IS SUBJECT TO ALL THE TERMS AND CONDITIONS, INCLUDING APPLICABLE ENDORSEMENTS, OF THE COMMERCIAL GENERAL LIABILITY INSURANCE MASTER POLICY. A COPY OF THE COMMERCIAL GENERAL LIABILITY INSURANCE MASTER POLICY ACCOMPANIES THIS CERTIFICATE. ADDITIONAL COPIES WILL BE PROVIDED TO THE CERTIFICATE HOLDER UPON REQUEST. PLEASE READ THE POLICY AND ALL ENDORSEMENTS.

IMPORTANT INFORMATION ON CLAIMS-MADE POLICY

THIS IS A CLAIMS MADE AND REPORTED POLICY. SUBJECT TO ITS TERMS, THIS POLICY APPLIES ONLY TO ANY CLAIM FIRST MADE AGAINST THE INSURED AND REPORTED IN WRITING TO THE UNDERWRITERS DURING THE POLICY PERIOD OR EXTENDED REPORTING PERIOD (AS SET OUT IN CLAUSE X. OF THE POLICY), IF APPLICABLE. DAMAGES AND CLAIMS EXPENSES SHALL BE APPLIED AGAINST THE DEDUCTIBLE. CLAIMS EXPENSES ARE WITHIN AND REDUCE THE LIMIT OF LIABILITY UNDER THIS POLICY. THE UNDERWRITERS SHALL NOT BE LIABLE FOR ANY DEFENSE COSTS OR FOR ANY JUDGEMENT OR SETTLEMENT AFTER THE LIMIT OF LIABILITY HAVE BEEN EXHAUSTED. PLEASE READ THIS POLICY CAREFULLY.

CLAIMS/INCIDENTS REPORTING

Full detail of any incident should be sent immediately by email to claims@veracityins.com or by letter to Veracity Insurance Solutions, 260 South 2500 West, Suite 303, Pleasant Grove UT 84062.

NO ADMISSION OF LIABILITY MAY BE MADE EITHER VERBALLY OR IN WRITING

Program Administrator:

Veracity Insurance Solutions, LLC
260 South 2500 West, Suite 303
Pleasant Grove UT 84062
888.568.0548
info@petcareins.com

UNIQUE MARKET REFERENCE
NUMBER:

B0572YF18ST11

AUTHORITY REFERENCE NUMBER:

YF18ST11

ADMINISTRATOR SIGNATURE:



NOTICE

This insurance policy is delivered as a surplus line coverage under the insurance code of the State of Louisiana.

In the event of insolvency of the company issuing this contract, the policyholder or claimant is not covered by the Louisiana Guaranty Association which guarantees only specific policies issued by an insurance company authorized to do business in Louisiana.

Louisiana surplus lines broker.: Daryle Stafford

A handwritten signature in cursive script, appearing to read "Daryle Stafford".