

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/14/2024

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 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	CONTACT Donna Zauner				
VTC Insurance Group	PHONE (A/C, No, Ext): (248) 828-3377 FAX (A/C, No	): (248) 828-3741			
Troy Office	E-MAIL ADDRESS: dzauner@vtcins.com				
1175 W. Long Lake Ste. 200	INSURER(S) AFFORDING COVERAGE	NAIC #			
Troy MI 48098-4960	INSURER A: Continental Insurance Co	035289			
INSURED	INSURER B: Valley Forge Insurance Co	20508			
Mid Michigan Roofing, L.L.C.	INSURER C: Continental Casualty Co	20443			
3232 Enterprise Drive	INSURER D: Colony Insurance Co	39993			
P.O. Box 5797	INSURER E :				
Saginaw MI 48603-0797	INSURER F:				

**COVERAGES** 

CERTIFICATE NUMBER: 24-25 Master

**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		ADDL	SUBR		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	rs
A	X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	s 1,000,000 s 100,000
	X X C U Included	х	Y	2077600738	6/18/2024	6/18/2025	MED EXP (Any one person)	\$ 15,000
							PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000
	POLICY X PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000
_	OTHER:							\$
	AUTOMOBILE LIABILITY	x			6/18/2024	6/18/2025	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
В	X ANY AUTO			ү 2077600691			BODILY INJURY (Per person)	\$
			Y				BODILY INJURY (Per accident)	\$
	X HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
							PIP-Basic	\$ Unlimited
	X UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$ 5,000,000
A	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 5,000,000
	DED RETENTION \$			2089091365	6/18/2024	6/18/2025		\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  Y/N						X PER OTH- STATUTE ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A					E.L. EACH ACCIDENT	\$ 1,000,000
C	(Mandatory in NH)  If yes, describe under	1	Y	2090124996	6/18/2024	6/18/2025	E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
	DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
D	Pollution Liability			CSP305379	6/18/2024	6/18/2025	Each Occurrence Limit	\$1,000,000
A	Inland Marine			2077600738	6/18/2024	6/18/2025	Leased/ented Equipment	\$25,000
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) P0055405 - Where required by written contract, Delta College is add'l insured for General Liability (GL) as respects ongoing & completed operations on a primary & non-contributory basis and add'l insured with respects to Automobile liability. GL, Auto & Workers Comp policies include waiver of subrogation on behalf of Delta College as required by written contract and where allowed by law. Umbrella/Excess liability coverage follows form over GL, Auto & Employers Liability. Insurer will endeavor to mail 30 days written notice of cancellation to the certificate holder.

CERTIFICATE HOLDER	CANCELLATION
Delta College Main Campus 1961 Delta Rd	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
University Center, MI 48710	AUTHORIZED REPRESENTATIVE
, i	Alan Chandler/DZAUN Alan P. Chandler

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CERTIFICATE HOLDER