

**2020 IEEE PES T&D
Sample Certificate of Insurance**

Accord™	CERTIFICATE OF LIABILITY INSURANCE	Date: (MM/DD/YY) Date
PRODUCER ABC INSURANCE COMPANY 123 MAIN STREET ANYTOWN, TEXAS 12345		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO TIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OF ALTER THE CONVERGAGE AFFORDED BY THE POLICIES BELOW.
INSURED EXHIBITOR APPOINTED CONTRACTOR EAC ADDRESS CITY, STATE ZIP		COMPANIES AFFORDING COVERAGE COMPANY A: COMPANY B: COMPANY C: COMPANY D:

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	Minimum Coverage Limits
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTORS' PROT _____	YOUR POLICY NUMBER	DATE EFFECTIVE	DATE EXPIRES	GENERAL AGGREGATE	\$ 1,000,000
					PRODUCTS - COMP/OP ADD	\$ 1,000,000
					PERSONAL & ADV INJURY	\$ 1,000,000
					EACH OCCURRENCE	\$ 1,000,000
					FIRE DAMAGE (Any one fire)	\$ 100,000
					MED EXP (Any one person)	\$ 5,000
	AUTOMOBILE LIABILITY <input 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 _____		4/16/2020	4/25/2020	COMBINED SINGLE LIMIT	\$
					BODILY INJURY (per person)	\$
					BODILY INJURY (per accident)	\$
					PROPERTY DAMAGE	\$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO _____		4/16/2020	4/25/2020	AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN AUTO ONLY	\$
					EACH ACCIDENT	\$
					AGGREGATE	\$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> OTHER THAN UMBRELLA FORM	Excess Liability Umbrella may be used to increase the limits of any of the fields to meet these requirements.			EACH OCCURRENCE	\$
					AGGREGATE	\$
						\$
A	WORKERS COMPENSATION AND EMPLOYER'S LIABILITY THE PROPRIETOR/ PARTNER/EXECUTIVE <input checked="" type="checkbox"/> INCL OFFICERS ARE: <input type="checkbox"/> EXCL	YOUR POLICY NUMBER	DATE EFFECTIVE	DATE EXPIRES	<input checked="" type="checkbox"/> WORK STATU-TORY LIMITS OTHER	\$
					EL EACH ACCIDENT	\$ 100,000
					EL- DISEASE - POLICY LIMIT	\$ 100,000
					EL- DISEASE - EA EMPLOYEE	\$ 100,000
	OTHER Professional Liability		4/16/2020	4/25/2020	Each Occurrence & Aggregate	

DESCRIPTION OF OPERATIONS/LOCATIONS.VEHICLES/ EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 IEEE PES, Show Management, Freeman and the Metropolitan Pier & Exposition Authority, SMG and their board members, officers, employees, and agents, as well as the Chicago Park District, its agents, officers, board members and employees are named as additional insured under General Liability for all aspects of the Show Dates, 4/16-25/2020 in Chicago, IL.

CERTIFICATE HOLDER Canfield Event Management LLC (CEM) ATTN: Shawn Boon Email: Shawn@cemllc.com	CANCELLATION SHOULD ANY OF THE THE ABOVE DESCRIBED BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30* DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
	AUTHORIZED REPRESENTATIVE