

Certificate of Insurance

Exhibitors are required to carry general liability insurance with limits of at least \$1,000,000 per occurrence, \$2,000,000 aggregate.

Motorcycle Industry Council and the Greater Columbus Convention Center must be named as additionally insured and should be in force September 16 - 25, 2017.

Please submit your Certificate of Insurance as soon as possible but no later than August 4, 2017.

COI's can be sent to: Aschelor@mic.org

Fax- (949) 517-7519

AIMExpo/ MIC Events Attn: Adam Schelor 2 Jenner, Suite 150 Irvine, CA 92618

A sample certificate is located on page 2 to show the proper placement of the required information.

Your insurance company should be able to provide you with this information, however, if you need to purchase show-specific insurance, you can contact John Buttine Insurance.(see page 3 for additional information)

Please note: exhibitors will not be permitted to move-in and set-up their displays if a proper certificate of insurance has not been received by Motorcycle Industry Council.

OP ID: KR



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/21/2017

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

certifica	ite holder in lieu of such e	ndorsement(s).						
PRODUCER			CONTACT NAME:		·			
Buttine Underwriter Purchasing Group			PHONE (A/C, No, Ext):	FAX (A/C, No):				
33 East 33rd St., 5th Floor New York, NY 100160 John M. Buttine			E-MAIL ADDRESS:					
			CUSTOMER ID #: 7RPGEXH					
			INSURER(S) AFFORDING COV	ERAGE	NAIC#			
INSURED	Exhibiting Company	<mark>/ </mark>	INSURER A: ABC Company					
	Street City, State Zip Code		INSURER B:					
			INSURER C:					
			INSURER D:					
			INSURER E:					
			INSURER F:					
COVERAGES CERTIFICATE NUMBER:			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	R TYPE OF INSURANCE		ADDL INSR	SUBR WVD	POLICYNUMBER	POLICYEFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
	GEN	NERAL LIABILITY							EACH OF CURRENCE	\$	1,000,000
A	X	COMMERCIAL GENER	RAL LIABILITY	X		POLICY #	01/01/2017	01/01/2018	PREMISES (Ea occurrence)	\$	100,000
		CLAIMS-MADE	OCCUR						MED EXP (Any one person)	\$	
									PERSONAL & ADV INJURY	\$	1,000,000
									GENERAL AGGREGATE	\$	2,000,000
	GEI	N'L AGGREGATE LIMIT	APPLIES PER:						PRODUCTS - COMP/OP AGG	\$	1,000,000
		POLICY PRO- JECT	LOC							\$	
	AUT	ANY AUTO							COMBINED SINGLE LIMIT (Ea accident)	\$	
									BODILY INJURY (Per person)	\$	
		ALL OWNED AUTOS							BODILY INJURY (Per accident)	\$	
		SCHEDULED AUTOS HIRED AUTOS							PROPERTY DAMAGE (PER ACCIDENT)	\$	
		NON-OWNED AUTOS								\$	
										\$	
		UMBRELLALIAB	OCCUR						EACH OCCURRENCE	\$	
		EXCESSLIAB	CLAIMS-MADE						AGGREGATE	\$	
		DEDUCTIBLE								\$	
		RETENTION \$								\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?								WC STATU- OTH- TORY LIMITS ER		
				N/A					E.L. EACH ACCIDENT	\$	
(Mandatory in NH) If yes, describe under			147.4					E.L. DISEASE - EA EMPLOYEE	\$		
		s, describe under SCRIPTION OF OPERAT	TONS below						E.L. DISEASE - POLICY LIMIT	\$	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Additional Insured as respects to claims arising out of the operations of
NAMED INSURED (EXHIBITING COMPANY) at American International Motorcycle
Expo, 9/16-25/2017: Motorcycle Industry Council and the Greater
Columbus Convention Center.

CER	TIFI	CAT	ΈH	OL	DER

MPE0001

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

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CANCELLATION

Council 2 Jenner Suite 150 Irvine, CA 92618

Motorcycle Industry



AIMExpo Greater Columbus Convention Center September 21-24, 2017

EXHIBITOR INSURANCE PROGRAM

EXHIBITOR GENERAL LIABILITY INSURANCE

Motorcycle Industry Council requires that all Exhibitors carry Commercial General Liability Insurance with limits of at least \$1,000,000 per occurrence, \$2,000,000 aggregate. Motorcycle Industry Council and the Greater Columbus Convention Center shall be named as Additional Insured. This Insurance must be in force during the lease dates of the event, September 19-25, 2017.

Our insurance:

- Protects exhibitors who do not have Commercial General Liability Insurance or who do not want to use their own insurance
- Protects foreign exhibitors whose insurance will not pay claims brought in U.S. courts
- Cost is \$65 per exhibiting company regardless of booth size
- We also offer 6 month and 12 month coverage for exhibitors attending multiple shows

ShowDown® EXHIBITOR EVENT CANCELLATION INSURANCE

This is an optional program that John Buttine Inc offers to exhibitors. This program covers your expenses to attend a show (airfare, hotel rooms, etc).

This insurance:

- Protects against loss of incurred expenses in the event of an Event's cancellation, relocation, postponement, or curtailment
- Covers the extra cost to get key staff or equipment to the show site in event of weather-related travel delays, sickness, death of immediate family and even jury duty
- Pays for loss related to damage of booth equipment and show-related products and displays
- Policy includes loss due to power outage at exhibition site

There are three limit options: \$10,000, \$25,000, and \$50,000 and the cost ranges from \$250 to \$750 per event.

IT'S EASY TO APPLY...

- Apply online at http://www.buttine.com/eventExhibitor.html
- Scan below to download our new Mobile App or search Buttine Insurance in the App Store.



QUESTIONS?

Please Contact:
Buttine Underwriters Purchasing Group, LLC
Kendra Reilly Monahan at 212-867-3642 or kar@buttine.com

Deadline to apply for these insurance programs is September 1, 2017