

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.



CERTIFICATE OF LIABILITY INSURANCE

OP ID: KR

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 certificate holder in lieu of such endorsement(s).

PRODUCER Buttine Underwriter Purchasing Group 33 East 33rd St., 5th Floor New York, NY 10016 John M. Buttine		CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: 7RPGEXH		FAX (A/C, No): 	
INSURED Exhibiting Company Street City, State Zip Code		INSURER(S) AFFORDING COVERAGE			NAIC #
		INSURER A: ABC Company			
		INSURER B:			
		INSURER C:			
		INSURER D:			
		INSURER E:			
		INSURER F:			

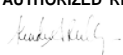
COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

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	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			POLICY #	01/01/2017	01/01/2018	EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	<input checked="" type="checkbox"/>					PREMISES (Ea occurrence)	\$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						MED EXP (Any one person)	\$
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 1,000,000
								\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (PER ACCIDENT)	\$
	<input type="checkbox"/> HIRED AUTOS							\$
	<input type="checkbox"/> NON-OWNED AUTOS							\$
	UMBRELLA LIAB						EACH OCCURRENCE	\$
	<input type="checkbox"/> EXCESS LIAB						AGGREGATE	\$
	<input type="checkbox"/> CLAIMS-MADE							\$
	<input type="checkbox"/> DEDUCTIBLE							\$
	<input type="checkbox"/> RETENTION \$							\$
	WORKERS COMPENSATION						WC STATUTORY LIMITS	OTHER
	AND EMPLOYERS' LIABILITY						E.L. EACH ACCIDENT	\$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/>	N/A				E.L. DISEASE - EA EMPLOYEE	\$
	If yes, describe under DESCRIPTION OF OPERATIONS 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.

CERTIFICATE HOLDER**CANCELLATION**

MPE0001 Motorcycle Industry Council 2 Jenner Suite 150 Irvine, CA 92618	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 
--	--

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