



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 *Las Vegas Convention Center* must be named as additionally insured and should be in force February 6-8, 2024.

Please submit your Certificate of Insurance as soon as possible but no later than January 1, 2024.

You may submit your COI by email, fax or mail to:

Email: dmetz@mic.org

Fax: (949) 517-7519

AIMExpo / MIC Events
Attn: Deanne Metz
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).



CERTIFICATE OF LIABILITY INSURANCE

OP ID: KR

DATE (MM/DD/YYYY)
06/15/2023

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 <div style="background-color: yellow; padding: 5px;"> Exhibiting Company & Booth # Street City, State Zip Code </div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: ABC Company</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: ABC Company		INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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INSURER D:															
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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						EACH OCCURRENCE 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	<input checked="" type="checkbox"/>		POLICY #	02/4/2024	2/10/2024	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (PER ACCIDENT) \$
	<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						
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			Y/N N/A			WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

Additional Insured as respects to claims arising out of the operations of (NAMED INSURED EXHIBITING COMPANY) at American International Motorcycle Expo, 2/4-2/10/2024: Motorcycle Industry Council and the Las Vegas Convention Center.

CERTIFICATE HOLDER

CANCELLATION

<p style="text-align: center;">MPE0001</p> <div style="background-color: yellow; padding: 5px; margin-top: 10px;"> Motorcycle Industry Council 2 Jenner Suite 150 Irvine, CA 92618 </div>	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <hr/> AUTHORIZED REPRESENTATIVE
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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 Las Vegas Convention Center shall be named as Additional Insured. This Insurance must be in force during the lease dates of the event, February 4-10, 2024.

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 \$80 per exhibiting company - regardless of booth size

IF YOU HAVE YOUR OWN INSURANCE

Certificate Holder:

Motorcycle Industry Council
2 Jenner suite 150
Irvine, CA 92618

Additional Insured:

Motorcycle Industry Council and the Las Vegas Convention Center

IF YOU NEED TO PURCHASE INSURANCE -IT'S EASY TO APPLY...

- Apply online here – [Exhibitor Application](#)

QUESTIONS?

Please Contact:

Buttine Underwriters Purchasing Group, LLC

Kendra Reilly Monahan at +1 212-867-3642 or kmonahan@risk-strategies.com

Deadline to apply for these insurance programs is January 1, 2024