



THEBOAR-06

AWARNER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/25/2025

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 have ADDITIONAL INSURED provisions or 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 License # 0757776 HUB International Insurance Services Inc. PO Box 20005 Encino, CA 91436	CONTACT NAME: PHONE (A/C, No, Ext): (818) 257-7400 FAX (A/C, No): (818) 257-7450 E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A : Hiscox Insurance Company INSURER B : INSURER C : INSURER D : INSURER E : INSURER F : NAIC # 10200
INSURED THE BOARD OF DIRECTORS, LLC 5600 W Lovers Lane Ste 116-279 Dallas, TX 75209	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

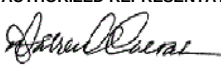
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PROJECT ☐ LOC OTHER:			US UEN 2817394.25	1/8/2025	1/8/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	☐ AUTOMOBILE LIABILITY ☐ ANY AUTO OWNED AUTOS ONLY ☒ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS ONLY			US UEN 2817394.25	1/8/2025	1/8/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	☐ UMBRELLA LIAB ☐ EXCESS LIAB DED ☐ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
A	☐ 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 Y	N/A	HSW281445425	1/8/2025	1/8/2026	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	☐ PRODUCTION PACKAGE			US UEN 2817394.25	1/8/2025	1/8/2026	SEE REMARKS

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
City and Borough of Juneau is included as Additional Insured with respect to Liability claims arising out of the operations of the Named Insured, as per written contract; certificate holder is included as Loss Payee as respects to leased/rented property/equipment, as per written contract. Workers Compensation Coverage is evidence only.

CERTIFICATE HOLDER

CANCELLATION

City and Borough of Juneau Division of Lands & Resources 155 Heritage Way Juneau, AK 99801	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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ADDITIONAL REMARKS SCHEDULE

AGENCY HUB International Insurance Services Inc.	License # 0757776	NAMED INSURED THE BOARD OF DIRECTORS, LLC 5600 W Lovers Lane Ste 116-279 Dallas, TX 75209
POLICY NUMBER SEE PAGE 1		
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

PRODUCTION PACKAGE
PRODUCTION PACKAGE LIMIT :
Extra Expense - \$500,000
Production Equipment - \$1,000,000
Props, Sets & Wardrobe - \$1,000,000
Third Party Property Damage - \$1,000,000

DEDUCTIBLES:
Extra Expense - \$2,500
Production Equipment - \$2,500
Props, Sets & Wardrobe - \$2,000
Third Party Property Damage - \$2,500

Auto Physical Damange:
Limit: \$1,000,000
Deductible: \$2,000 -When a picture vehicle is being used as a prop, in front of the camera, its motor is not on and its not moving.
10% of the Loss subject to a \$2,500 Minimum and a \$7,500 Maximum - All other autos



Blanket Additional Insured Endorsement

In consideration of the premium charged and on the understanding that all other terms, conditions and exclusions remain unchanged, it is agreed that this endorsement modifies only the terms and conditions of the Coverage Part(s) listed below:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

Name of Person or Organization (Additional Insured)

City and Borough of Juneau
Division of Lands & Resources 155 Heritage Way
Juneau, AK 99801

- I. It is agreed that WHO IS COVERED is amended to include the following:
- A. Any person or organization from whom **you** lease a premises, and with whom **you** have agreed through a written or oral contract to provide insurance as afforded by this Coverage Part, are added as additional **insureds**. However:
1. this insurance applies to such additional **insured** only to the extent of liability arising out of the ownership, maintenance or use of that particular part of such premises leased to **you** in **your** on-going operations; and
 2. if coverage provided to the additional **insured** is required by contract or agreement, the insurance afforded to such additional **insured** will not be broader than that which **you** are required by the contract or agreement or that which **you** would have been entitled to coverage under this Coverage Part, whichever is less.
- This insurance does not apply to:
1. any **occurrence** that takes place after **you** cease to be a tenant in the premises or the end of the **policy period**, whichever comes first;
 2. structural alterations, new construction or demolition operations performed by or on behalf of the additional **insured**; or
 3. **bodily injury, property damage or personal and advertising injury** arising out of the sole negligence of the additional **insured**.
- B. Any person or organization from whom **you** lease equipment or props, sets and wardrobe, and with whom **you** have agreed through a written or oral contract to provide insurance as afforded by this Coverage Part, are added as an additional **insured**. However:
1. this insurance applies to such additional **insured** only to the extent of their liability arising out of the maintenance, operation or use by **you** or anyone on **your** behalf of the equipment or props, sets and wardrobe in the performance of **your** on-going operations; and
 2. if coverage provided to the additional **insured** is required by contract or agreement, the insurance afforded to such additional **insured** will not be broader than that which **you** are required by the contract or agreement or that which **you** would have been entitled to coverage under this Coverage Part, whichever is less.
- This insurance does not apply to:
1. any **occurrence** that takes place after the equipment or props, sets and wardrobe rental agreement/lease expires or the end of the **policy period**, whichever comes first; or
 2. **bodily injury, property damage or personal and advertising injury** arising out of the sole negligence of the additional **insured**.
- C. Any:
1. financial institution or any entity that has a financial interest in **your** business;