



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/22/2025

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		CONTACT NAME: Ashley Byrd		
McGriff Wrap-up Admin 2000 International Park Drive, Suite 600 Birmingham, AL 35243		PHONE (A/C, No, Ext):		FAX (A/C, No):
		E-MAIL ADDRESS: Ashley.Byrd@mcgriff.com		
INSURED		INSURER(S) AFFORDING COVERAGE		NAIC#
Read Window Products, LLC 5900 Weisbrook Lane Knoxville, TN, 37909 Attn: David Storm		INSURER A: Capitol Specialty Insurance Corporation		10328
		INSURER B: Westchester Surplus Lines Insurance Company		10172
		INSURER C: Endurance American Specialty Insurance Company		41718
		INSURER D: StarStone Specialty Insurance Company		44776
		INSURER E: Swiss Re Corporate Solutions America Insurance Corporation		29874

**COVERAGES**      **CERTIFICATE NUMBER: 28221**      **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 SUBR INSD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS					
A	COMMERCIAL GENERAL LIABILITY			CT20240252-01	11/01/2025	11/05/2027	GL-DamageToRentedPremises					
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						\$100,000					
	<input type="checkbox"/>						\$2,000,000					
	<input type="checkbox"/>						\$4,000,000					
	GEN'L AGGREGATE LIMIT APPLIES PER:						GL-MedExp					
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						\$2,000,000					
<input type="checkbox"/> OTHER							\$4,000,000					
B	UMBRELLA LIAB		OCCUR	G48835697 001	11/01/2025	11/05/2027	EUL-Aggregate					
	<input type="checkbox"/> EXCESS LIAB		<input type="checkbox"/> CLAIMS - MADE				\$10,000,000					
	DED	RETENTION \$					\$10,000,000					
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				Y / N			WC-StatutoryLimits	Other				
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?							WC-E.L.EachAccident					
(Mandatory NH) If yes, describe under DESCRIPTION OF OPERATIONS below							WC-E.L.DiseasePolicyLimit					
							WC-E.L.Disease EachEmployee					
C Excess & Umbrella #2				ELD30072613600	11/01/2025	11/05/2027	EUL-Aggregate					
							\$15,000,000					
D Excess #3				CSX00071530P-00	11/01/2025	11/05/2027	Each-Aggregate					
							\$10,000,000					
							Each-Occurrence					
E Excess #4				EXS 2001778 00	11/01/2025	11/05/2027	EUL-EachOccurrence					
							\$10,000,000					
							Each-Aggregate					
Excess #5							\$15,000,000					
							Each-Occurrence					
							Each-Aggregate					
							\$15,000,000					
							Each-Occurrence					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Project: South Broad District Ballpark

CIP ID#: 10324 - 031

Coverage and limits noted above are the total limits provided while working at this project site. Coverage is provided for onsite only.

This Certificate does not evidence the policy terms and conditions.

## CERTIFICATE HOLDER

Read Window Products, LLC  
5900 Weisbrook Lane  
Knoxville, TN, 37909  
Attn: David Storm

## CANCELLATION

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 : Authorized Representative

