# Certificate of Liability Insurance

**Date (MM/DD/YYYY):**
9/15/2024

**Certificate Number:**
20087560

**Coverages**

<table>
<thead>
<tr>
<th>Insr Ltr</th>
<th>L Ty</th>
<th>Type of Insurance</th>
<th>Add Ins</th>
<th>Wd</th>
<th>Policy Number</th>
<th>Policy Eff (MM/DD/YYYY)</th>
<th>Policy Exp (MM/DD/YYYY)</th>
<th>Limits</th>
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</thead>
<tbody>
<tr>
<td>A</td>
<td>C</td>
<td>Commercial General Liability</td>
<td>Y Y</td>
<td></td>
<td>MWZY 59829-23</td>
<td>9/15/2023</td>
<td>9/15/2024</td>
<td>Y Y $10,000,000</td>
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<tr>
<td>A</td>
<td>A</td>
<td>Automobile Liability</td>
<td>Y Y</td>
<td></td>
<td>MWTB 21711-23</td>
<td>9/15/2023</td>
<td>9/15/2023</td>
<td>Y Y $10,000,000</td>
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<tr>
<td>B</td>
<td>B</td>
<td>Workers Compensation and Employers' Liability</td>
<td>Y N</td>
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<td>WLR C50726435</td>
<td>9/15/2023</td>
<td>9/15/2024</td>
<td>X $10,000,000</td>
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<td>B</td>
<td>X</td>
<td>Excess Liability</td>
<td>Y N</td>
<td></td>
<td>WCU C50726678</td>
<td>9/15/2023</td>
<td>9/15/2024</td>
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</tbody>
</table>

**Description of Operations / Locations / Vehicles (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**

EXCESS WORKERS COMPENSATION - * POLICY APPLIES TO OHIO. Products/Completed Operations Aggregate Limit Subject to the General Aggregate Limit. All policies (except Workers’ Compensation/EL) contain a special endorsement with “Primary and Noncontributory” wording.

**Certificate Holder**

Lake Charles Harbor & Terminal District
Attn: Sharon Edwards
P.O. Box 3753
Lake Charles LA 70602

**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**

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All policies (except Workers' Compensation/EL) include a blanket automatic additional insured endorsement [provision] that confers additional insured status to the certificate holder only if there is a written contract between the named insured and the certificate holder that requires the named insured to name the certificate holder as an additional insured. In the absence of such a contractual obligation on the part of the named insured, the certificate holder is not an additional insured under the policy.

All policies include a blanket automatic waiver of subrogation endorsement [provision] that provides this feature only when there is a written contract between the named insured and the certificate holder that requires it. In the absence of such a contractual obligation on the part of the named insured, the waiver of subrogation feature does not apply.