

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)

PRODUCER

Your Insurance Company
Name, Address, and Phone Number

INSURED

Your Name and Address

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

INSURER A:

INSURER B:

INSURER C:

INSURER D:

INSURER E:

Must Match
Reservation/Contract

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <div><div>COMMERCIAL GENERAL LIABILITY</div><div><div>CLAIMS MADE</div><div>OCCUR</div></div></div>				<div>EACH OCCURRENCE \$</div> <div>FIRE DAMAGE (Any one fire) \$</div> <div>MED EXP (Any one person) \$</div> <div>PERSONAL & ADV INJURY \$</div> <div>GENERAL AGGREGATE \$</div> <div>PRODUCTS - COMP/OP AGG \$</div>
	GEN'L AGGREGATE LIMIT APPLIES PER: <div><div>POLICY</div><div>PRO-JECT</div><div>LOC</div></div>				
	AUTOMOBILE LIABILITY <div><div>ANY AUTO</div><div>ANY OWNED AUTOS</div><div>SCHEDULED AUTOS</div><div>HIRED AUTOS</div><div>NON-OWNED AUTOS</div></div>				<div>COMBINED SINGLE LIMIT (Ea accident) \$</div> <div>BODILY INJURY (Per person) \$</div> <div>BODILY INJURY (Per accident) \$</div> <div>PROPERTY DAMAGE (Per accident) \$</div>
	GARAGE LIABILITY <div><div>ANY AUTO</div></div>				<div>AUTO ONLY - EA ACCIDENT \$</div> <div>OTHER THAN AUTO ONLY: <div>EA ACC</div> \$</div> <div>AGG \$</div>
	EXCESS LIABILITY <div><div>OCCUR</div><div>CLAIMS MADE</div></div> <div><div>DEDUCTIBLE</div><div>RETENTION \$</div></div>				<div>EACH OCCURRENCE \$</div> <div>AGGREGATE \$</div> <div>\$</div> <div>\$</div> <div>\$</div>
	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY				<div><div>WC STATU-TORY LIMITS</div><div>OTH-ER</div></div> <div>E.L. EACH ACCIDENT \$</div> <div>E.L. DISEASE - EA EMPLOYEE \$</div> <div>E.L. DISEASE - POLICY LIMIT \$</div>
	OTHER Rented & Leased Equipment				<div>Limit \$\$\$</div> <div>Deductible \$\$\$</div>

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

Gotham Sound and Communications, Inc. must be listed as Additional Insured and Lost Payee.

Type of Insurance
Gotham Requires

Credit Card Auth.
Required

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER: ____

CANCELLATION

Gotham Sound and Communications, Inc.
35-10 36th Avenue
Second Floor
New York, NY 11106

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL ____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

Gotham's Name
MUST Appear