SAMPLE

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE

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

YOUR INSURANCE BROKER'S NAME AND ADDRESS

CONTACT NAME

PHONE (A/C, No, Ext):

FAX (A/C, No):

E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: ACE AMERICAN INSURANCE COMPANY	22667
INSURER B: INDEMNITY INS CO OF NORTH AMERICA	43575
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURED

YOUR ENTITY NAME AND ADDRES
(MUST MATCH ENTITY ON CONTRACT)

COVERAGES **CERTIFICATE NUMBER:** 10822 **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 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 and Deductible	
	GENERAL LIABILITY	X	X	YOUR POLICY #	EFFECTIVE DATE	EFFECTIVE DATE	EACH OCCURRENCE	$
	X COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
							GENERAL AGGREGATE	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	$
	X POLICY PRO-JECT LOC							$
	AUTOMOBILE LIABILITY	X	X	YOUR POLICY #	EFFECTIVE DATE	EFFECTIVE DATE	COMBINED SINGLE LIMIT (Ea accident)	$
	X ANY AUTO						BODILY INJURY (Per person)	$
	ALL OWNED AUTOS / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS / NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
								$
X	UMBRELLA LIAB X OCCUR	X	X	YOUR POLICY #	EFFECTIVE DATE	EFFECTIVE DATE	EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DED RETENTION $							$
	PROPERTY AND/OR PROPS, SETS, & WARDROBE	N/A	X	YOUR POLICY #	EFFECTIVE DATE	EFFECTIVE DATE	LIMIT - $	DED: $
								$
								$
								$

ALL ITEMS IN RED BOXES ARE REQUIRED

POLICY LIMITS MAY VARY, CHECK YOUR CONTRACT FOR SPECIFIC REQUIRED AMOUNTS FOR ALL TYPES

THE CERTIFICATE HOLDER IS INCLUDED AS ADDITIONAL INSUREDS UNDER THE GENERAL LIABILITY AND AUTO LIABILITY POLICIES (INCLUDING UMBRELLA/EXCESS) AS THEIR INTERESTS MAY APPEAR BUT ONLY WITH RESPECT TO THE OPERATIONS OF THE NAMED INSURED. THE CERTIFICATE HOLDER IS INCLUDED AS LOSS PAYEES UNDER THE PROPERTY AND/OR PROPS, SETS & WARDROBE POLICIES.

CERTIFICATE HOLDER

WARNER BROS. STUDIO OPERATIONS; WB STUDIO ENTERPRISES INC.; WARNER BROS. ENTERTAINMENT INC.; WARNER MEDIA, LLC; AND THEIR PARENT, SUBSIDIARY AND AFFILIATED COMPANIES, AND THEIR EMPLOYEES, AGENTS, OFFICERS, AND DIRECTORS
4000 WARNER BLVD.
BURBANK, CA 91522

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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