

# Certificate of Liability Insurance

**South Dakota Division of Insurance**  
 124 South Euclid Avenue, 2nd Floor, Pierre, SD 57501  
 Phone: 605.773.3563 email: insurance@state.sd.us

Insured		Certificate Holder	
Mailing Address		Mailing Address	
City, State, Zip		City, State, Zip	
Phone		Phone	

### Type of Insurance - General Liability

Carrier Name:					NAIC #			
Policy Number				Effective Date		Expiration Date		Limits
Commercial General Liability	Claims Made		Occurrence		Each Occurrence		\$	-
Aggregate Limit Applies Per	Policy		Project		Location	Damage to Rented Premises	\$	-
Description						Med Expense (any one person)	\$	-
						Personal and Advertising Injury	\$	-
						General Aggregate	\$	-
						Products - Completed Operations Aggregate	\$	-

### Type of Insurance - Automobile Liability

Carrier Name:					NAIC #			
Policy Number				Effective Date		Expiration Date		Limits
	Any Auto	Description						
	All Owned Auto				Combined Single Limit		\$	-
	Scheduled Autos				Bodily Injury (per person)		\$	-
	Hired Autos				Bodily Injury (per accident)		\$	-
	Non-Owned Autos				Property Damage (per accident)		\$	-

### Type of Insurance - Umbrella - Excess

Carrier Name:					NAIC #			
Policy Number				Effective Date		Expiration Date		Limits
	Umbrella	Description						
	Excess				Each Occurrence		\$	-
	Other				Aggregate		\$	-

### Type of Insurance - Workers Compensation

Carrier Name:					NAIC #			
Policy Number				Effective Date		Expiration Date		Limits
The Proprietor/Partners Executive Officers Members Excluded?		Yes				E.L. Each Accident	\$	-
		No				E.L. Disease EA Employee	\$	-
						E.L. Disease Policy Limit	\$	-
Description								

Producer		Phone:		Address	
Agency				Email	

***This certificate does not affirmatively or negatively amend, extend, or alter the coverage afforded by the insurance policy. In the event the policies are cancelled prior to the expiration date, notice will be delivered in accordance with the policy provisions.***

**Authorized Producer Signature - Date**