



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/18/2014

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 RDS Insurance Brokers 458 W. Arrow Hwy, Unit C San Dimas, CA 91773 Phone No. (909) 305-1200 Fax No. (909) 305-1205		CONTACT NAME: Amber Payan PHONE (A/C. No. Ext): (909) 305-1200 FAX (A/C. No): (909) 305-1205 E-MAIL ADDRESS: amber@rdsins.com																						
INSURED Rock Steady Productions, Inc. 17212 Roseton Avenue Artesia, CA 90701 Phone No. (562) 809-0504 Fax No. (562) 685-0122		<table border="1"> <thead> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A:</td> <td>AGL - American Guarantee and Liability Insurance Company</td> <td>26247</td> </tr> <tr> <td>INSURER B:</td> <td>EFM - Empire Fire and Marine Insurance Company</td> <td>21326</td> </tr> <tr> <td>INSURER C:</td> <td>ZII - Zurich American Insurance Company of Illinois</td> <td>27855</td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	AGL - American Guarantee and Liability Insurance Company	26247	INSURER B:	EFM - Empire Fire and Marine Insurance Company	21326	INSURER C:	ZII - Zurich American Insurance Company of Illinois	27855	INSURER D:			INSURER E:			INSURER F:		
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COVERAGES

CERTIFICATE NUMBER: 529567

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
EFM	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	X		EN9446079-01	01/31/2014	01/31/2015	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
AGL	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$			SXS4869853-00	02/12/2014	01/31/2015	EACH OCCURRENCE	\$ 2,000,000
							AGGREGATE	\$ 2,000,000
								\$
ZII	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			WC9339053-03	01/31/2014	01/31/2015	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER	
				Proof of Workers Compensation Insurance only.			E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
EFM	Inland Marine			EN9446079-01	01/31/2014	01/31/2015	See Attached	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Certificate Holder is named as an Additional Insured and Loss Payee as their interests may appear.

All coverages expire at 12:01 a.m. Standard Time.

CERTIFICATE HOLDER

CANCELLATION

City & County of San Francisco Real Estate Division ATTN: Director of Property 25 Van Ness Ave San Francisco, CA 94102 United States Of America Phone No. _____ Fax No. _____	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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ACORD 25 (2010/05)

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This certificate of insurance does not affirmatively or negatively amend, extend, or alter the coverage afforded by the insurance policy.

ADDITIONAL COVERAGE DETAILS

DATE (MM/DD/YY)

09/18/2014

INSURED **Rock Steady Productions, Inc.**

The following is attached to and made part of certificate number 529567.

Policy Details	Coverage	Limit	Deductible
Inland Marine			
Company:	Empire Fire and Marine Insurance Company		
Policy Number:	EN9446079-01		
*Period:	01/31/2014 - 01/31/2015: 365 Day(s)		
	Miscellaneous Rented Equipment	250,000	2,000
	Props, Sets & Wardrobes	50,000	1,500
	Negative Film or Videotape	2,000	Not Applicable
	Faulty Stock, Camera & Processing	2,000	10% of loss, \$5,000 minimum, \$12,500 maximum
	Extra Expense	10,000	2,500
	Office Contents	10,000	1,500
	Third Party Property Damage	500,000	2,500
	Hired/Non-Owned Physical Damage-Aggregate	Excluded	
	Hired/Non-Owned Physical Damage-Per Vehicle	Excluded	
	Worldwide Coverage	Excluded	
	Terrorism	Excluded	

*All coverages expire at 12:01 a.m. Standard Time.

Coverage is not afforded for stunts & pyrotechnics except for those declared, scheduled and accepted by the insurance company(s).

For a complete listing of coverages, terms, conditions and exclusions, please view your policy.

Schedule of Forms

DATE (MM/DD/YY)

09/18/2014

INSURED **Rock Steady Productions, Inc.**

The following is attached to and made part of certificate number 529567, as of 09/18/2014 04:24 PM PT.

Form(s) and Endorsement(s) to be included at time of policy issuance.

Form #	Ed.	Name
Entertainment Production Package		
Notices		
U-GU-319-F	0109	Important Notice - In Witness Clause
U-GU-1041-A	0311	Advisory notice to policyholders regarding the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC") regulations
U-GU-874-A	0611	Notice of Disclosure for Agent and Broker Compensation
Common		
EM 3652	0108	Jacket - EF&M
EM 3601	0303	Common Declarations
UGU619ACW	1002	Schedule of Forms and Endorsements
IL 0017	1198	Common Policy Conditions
EM0860	0709	Definition of Productions and Budget Limitations
IL0270	0912	California Changes - Cancellation and Nonrenewal Endorsement
EM0867CA	0709	Minimum Earned Premium Endorsement
IL 0003	0907	Calculation of Premium
U-GU-630-C	1207	Disclosure of Important Information (Relating to Terrorism Risk Insurance Act)
Inland Marine		
EM 4800	1106	Commercial Inland Marine Declarations
UGU619ACW	1002	Schedule of Forms and Endorsements
CM 0001	0904	Commercial Inland Marine Conditions
EM4802	0709	Coverage A. Miscellaneous Equipment
EM 4803	1106	Coverage B. Props, Sets and Wardrobe
EM4804	0709	Coverage C. Negative Film, Video Tape and Digitized Image
EM4805	0709	Coverage D. Faulty Stock, Camera and Processing
EM 4806	0905	Coverage E. Third Party Property Damage
EM4807	0709	Coverage F. Extra Expense
UCIM105ACW	1106	Loss Payable - Endorsement and Schedule
EM 4809	0705	Office Equipment and Furnishings
EM 4810	0705	Owned Equipment Exclusion
EM4812	0709	Average Rate Endorsement
EM 4819	1106	Commercial Inland Marine Changes
U-GU-682-A-CW	0804	Certified Terrorism Exclusion
U-GU-682-B-CW	0108	Exclusion of Certified Acts of Terrorism
General Liability		
EM 3602	0302	Commercial GL Coverage Declarations
UGU619ACW	1002	Schedule of Forms and Endorsements
CG 0001	1204	Commercial General Liability Coverage Form
IL 0021	0702	Nuclear Energy Liability Exclusion Endorsement
CG 2011	0196	Additional Insured - Managers of Lessors of Premises
CG 2012	0509	Additional Insured - State or Political Subdivision-Permit
CG 2026	0704	Additional Insured - Designated Person or Organization
CG 2028	0704	Additional Insured - Lessor of leased equipment
CG 2147	0798	Employment Related Practices Exclusion
U-GL-1171-A-CW	0703	Fungi Bacteria Exclusion
U-GL-1178-A-CW	0703	Asbestos Exclusion
EM 4634	0704	Lead Exclusion
EM 4630	1106	Field of Entertainment Productions Exclusion
EM 4632	0705	Premium Rate Schedule
EM 4633	1106	Removal of Coverage for Premises in the Short Term Control of the Insured
EM 4650	0905	Commercial General Liability Changes
CG 3234	0105	California Changes
EM0859	0311	Definition of Employee
U-GL-1198-A-CW	0204	Violation of Communication or Information Law Excl
CG 2146	0798	Abuse or Molestation Exclusion
U-GL-1517-A CW	0112	Collection or Distribution of Material or Information in Violation of Law Exclusion
CG 2173	0108	Exclusion of Certified Acts of Terrorism
Workers' Compensation Policy	Policy form assignment to be handled by insurance carrier.	
Excess Liability Policy		
Excess Liability		
Notices		
U-GU-319-F	0109	Important Notice - In Witness Clause
U-GL-1217-C-CW	0613	Notice To Policyholders - Potential Restrictions of Terrorism Coverage
U-GU-1041-A	0311	Advisory notice to policyholders regarding the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC") regulations
U-GU-874-A	0611	Notice of Disclosure for Agent and Broker Compensation
U-GU-1177-A MN	0913	Minnesota Civil Marriage Policyholder Notice
Forms		
U-SXS-104-A CW	0911	Straight Excess Liability Policy (jacket)

Workers' Compensation Policy Policy form assignment to be handled by insurance carrier.

Excess Liability Policy

Excess Liability

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U-GU-874-A	0611	Notice of Disclosure for Agent and Broker Compensation
U-GU-1177-A MN	0913	Minnesota Civil Marriage Policyholder Notice
Forms		
U-SXS-104-A CW	0911	Straight Excess Liability Policy (jacket)

This Certificate of Liability Insurance includes the Type of Insurance, Limits, and Schedule of Forms in effect as of 09/18/2014 04:24 PM PT. It does not affirmatively or negatively amend, extend, or alter the coverage afforded by the insurance policy nor confer any rights upon the certificate holder. You may be required to request an updated certificate in the event of subsequent policy modifications.

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Form #	Ed.	Name
U-SXS-D-100-A CW	0911	Straight Excess Liability Policy Declarations
U-SXS-101-A CW	0911	Schedule of Underlying Insurance
U-SXS-103-A CW	0911	Schedule of Forms & Endorsements
U-SXS-100-A CW	0911	Straight Excess Liability Policy
U-GU-692-C-CW	0613	Disclosure Of Premium (Relating To Disposition Of TRIA)
U-EXS-297-B-CW	0106	Conditional Exclusion of Terrorism (Relating to Disposition of Federal Terrorism Risk Insurance Act)
U-EXS-312E CW	0112	Exclusion - Collection or Distribution of Material or Information in Violation of Law
U-EXS-273-B CW	0108	Certified Acts of Terrorism Exclusion
U-EXS-178-B CA	0411	California Changes Cancellation Nonrenewal

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