

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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						CT Zain Jeew	/anioo				
Zain Jeewanjee Insurance Agency						100 70	3-4900 Ext:490)2 FAX (A/C, No):	408-9	97-7890	
1494 Hamilton Way					E-MAIL						
Suite 101										NAIC #	
San Jose CA 95125					INSURER A: HDI Global Specialty SE				NAIC#		
INSURED						INSURER B: Axis Insurance Company					
					1 3						
USA Cricket Inc. / Midwest Cricket League 1530 S. Tejon St.					INSURER C:						
1550 S. Tejori St.						INSURER D:					
Colorado			CO 80905			INSURER E:					
COVERAGES CER			RTIFICATE NUMBER:			INSURER F: REVISION NUMBER:					
					BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD						
IN Cl	DICATED. NOTWITHSTANDING ANY REC ERTIFICATE MAY BE ISSUED OR MAY PE (CLUSIONS AND CONDITIONS OF SUCH	QUIRE RTAII	MEN N, TH	T, TERM OR CONDITION OF E INSURANCE AFFORDED E	F ANY C BY THE	ONTRACT OR POLICIES DES	OTHER DOC SCRIBED HER	UMENT WITH RESPECT T	O WHIC	H THIS	
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
	X COMMERCIAL GENERAL LIABILITY					(,	(EACH OCCURRENCE	\$ 1,00	00,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300	0,000	
								MED EXP (Any one person)	\$ 5,00	00	
Α				HDGL19000267		3/1/2020	3/1/2021	PERSONAL & ADV INJURY	\$ 1,00	00,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE		00,000	
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,00	00,000	
	OTHER:							Deductible	\$ 2,50	00	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO							BODILY INJURY (Per person)	\$		
	ALL OWNED SCHEDULED AUTOS AUTOS							BODILY INJURY (Per accident)	\$		
	HIRED AUTOS NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)	\$		
	No rec							(i di docidoni)	\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$								\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYEE	\$		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
В	Maximum Medical			SRPO-171217		3/1/2020	3/1/2021	Limits: \$25,000			
В	Accidental Death			SRPO-171217		3/1/2020	3/1/2021	Limits: \$10,000			
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	ACORE	│ ○ 101, Additional Remarks Schedu	ile, may b	e attached if mor	e space is requir	ed)			
THE	ECERTIFICATE HOLDER IS ADDED AS ADDI' EPOLICY PERIOD. m Name: Pak XI nt: 30 over red ball and T20 with white ba				ECT TO	LIABILITY ARISI	NG OUT OF O	PERATIONS OF THE NAMED) INSUR	ED DURING	
CERTIFICATE HOLDER						CANCELLATION					
OLIVIII IOATE HOLDER						CANCLLATION					
Pak XI						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						