

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/28/2017

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 have ADDITIONAL INSURED provisions or 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 liquid for the policy certain policies.

		certificate does not confer rights	to th	e cerl	tificate holder in lieu of s							
PRODUCER						CONTACT NAME:						
Aon Risk Services Northeast, Inc.						PHONE (A/C, No, Ext): (866) 283-7122 FAX (A/C, No): (800) 363-0105						
1660 West 2nd St. Suite 650						E-MAIL ADDRESS:						
Cleveland, OH 44113						INSURER(S) AFFORDING COVERAGE NAIC #						
						INSURER A: United Educators Insurance					10020	
INSURED						INSURER B:						
The Ohio State University						INSURER C:						
1961 Tuttle Park Place 2nd Floor						INSUR	ERD:					
Columbus, OH 43210						INSURER E:						
						INSURER F:						
COVERAGES CERTIFICATE NUMBER: 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	SR TYPE OF INSURANCE		ADDL	SUBR	POLICY NUMBER			POLICY EXP (MM/DD/YYYY)	LIMITS			
	X	COMMERCIAL GENERAL LIABILITY					(	(AMAZONITIT)	EACH OCCURRENCE \$ 1,000		00.000	
		CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)		00,000	
	-								MED EXP (Any one person) \$ Excl		luded	
	-				LPD201700064400		05/01/2017	05/01/2018	PERSONAL & ADV INJURY	\$ 1,00	00,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:								GENERAL AGGREGATE \$ 3,000,000			
	X POLICY PRO- JECT LOC									\$ 3,00		
	AUT	OTHER:	-	-					Inc. Med. Malpractice	\$ 1,00	00,000	
	AU	ANY AUTO							(Ea accident)	\$		
		OWNED AUTOS ONLY AUTOS ONLY HIRED NON-OWNED AUTOS ONLY  UMBRELLA LIAB X OCCUR								\$		
									BODILY INJURY (Per accident) \$ PROPERTY DAMAGE			
									(Per accident)	\$		
						0:	05/01/2017	05/01/2018		05.0	000,000	
Α	X	EXCESS LIAB CLAIMS-MADE		C04-42W					EACH OCCURRENCE \$ 25,0 AGGREGATE \$ 25,0			
		DED RETENTION \$								\$ 20,0	00,000	
		RKERS COMPENSATION EMPLOYERS' LIABILITY				=1123			PER OTH-	3		
ANYPROPRIETOR/PARTNER/EXECUTIVE TYN										•		
	OFFICER/MEMBEREXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A						E.L. DISEASE - EA EMPLOYEE	\$		
									E.L. DISEASE - POLICY LIMIT	\$		
DESC	RIPT	ION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	CORD	101, Additional Remarks Schedul	le, may be	attached if more	e space is require	d)			
Evic	lenc	e of Coverage. General Liability pol	icy a	pplies	only to students while wor	rking of	fsite in a curri	culum require	d of Ohio State University	approv	ved	
internship, practicum or work study, and continuing field work done in relation to same. Coverage includes Professional Liability for students on a claims made.												
basis. Limits shown are excess of the primary General Liability coverage. You are included as an Additional Insured on the Umbrella Liability policy where the												
Ohio State University is obligated as a result of any contract or agreement entered into prior to loss that requires The Ohio State University to furnish insurance to you provided by the Umbrella Liability policy. The Waiver of Subrogation applies in your favor on the Umbrella Liability policy where such waiver is included in												
any	con	tract or agreement executed prior to	the	date o	of loss.	oo iii yo	di lavoi oli ti	ie Offibrella L	lability policy where such t	waiver	is included in	
CEF	RTIF	ICATE HOLDER				CANC	CANCELLATION					
		·										
						SHO	ULD ANY OF 1	THE ABOVE DE	SCRIBED POLICIES BE CA	NCELL	ED BEFORE	
The Ohio State University						THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
1961 Tuttle Park Place 2nd Floor.												
Columbus, OH 43210						AUTHORIZED REPRESENTATIVE						

Aon Risk Services Northeast, Inc.