

ACORDTM**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

12/08/2021

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 Conner Strong & Buckelew MEL Underwriting Unit P.O. Box 99106 Camden, NJ 08101	CONTACT NAME: MEL Underwriting Service Centr PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: MELRequest@connerstrong.com <table border="1"> <tr> <th data-bbox="816 426 1437 451">INSURER(S) AFFORDING COVERAGE</th> <th data-bbox="1437 426 1572 451">NAIC #</th> </tr> <tr> <td data-bbox="816 457 1437 483">INSURER A : TRICO Municipal JIF</td> <td data-bbox="1437 457 1572 483"></td> </tr> <tr> <td data-bbox="816 489 1437 514">INSURER B : Municipal Excess Liability JIF</td> <td data-bbox="1437 489 1572 514"></td> </tr> <tr> <td data-bbox="816 520 1437 546">INSURER C :</td> <td data-bbox="1437 520 1572 546"></td> </tr> <tr> <td data-bbox="816 552 1437 577">INSURER D :</td> <td data-bbox="1437 552 1572 577"></td> </tr> <tr> <td data-bbox="816 583 1437 609">INSURER E :</td> <td data-bbox="1437 583 1572 609"></td> </tr> <tr> <td data-bbox="816 615 1437 640">INSURER F :</td> <td data-bbox="1437 615 1572 640"></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : TRICO Municipal JIF		INSURER B : Municipal Excess Liability JIF		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A : TRICO Municipal JIF															
INSURER B : Municipal Excess Liability JIF															
INSURER C :															
INSURER D :															
INSURER E :															
INSURER F :															
INSURED City of Woodbury 33 Delaware Street, PO Box 180 Woodbury, NJ 08096															

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	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ☐ NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐ Y / N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N / A				PER STATUTE ☐ OTH-ER ☐ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	JIF Crime			TRI221001-91	01/01/2022	01/01/2023	\$50,000
B	MEL Excess Crime			MEL01220187	01/01/2022	01/01/2023	\$950,000 XS \$50,000
B	MEL Stat Bond			MEL01220187	01/01/2022	01/01/2023	\$1,000,000 Ded: \$1000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

JIF Blanket Crime Evidence of Public Employee Dishonesty (Employees & Volunteers)-Coverage O; Forgery and Alteration-Coverage B; Theft, Disappearance and Destruction-Coverage C; Robbery and Safe Burglary-Coverage D and Computer Fraud with Funds Transfer-Coverage F. Coverage O includes Municipal Court employees not required by law to be individually bonded. Coverage O excludes all Statutory positions(those positions required by law to be individually bonded).
 (See Attached Descriptions)

CERTIFICATE HOLDER**CANCELLATION**

City of Woodbury 33 Delaware Street, PO Box 180 Woodbury, NJ 08096	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 
---	--

© 1988-2014 ACORD CORPORATION. All rights reserved.

DESCRIPTIONS (Continued from Page 1)

MEL Crime Policy - Evidence of Statutory Bond coverage - Coverage O applies to Statutory Court positions such as Magistrate, Court Clerk, Court Administrator and the position of Fire District Treasurer.

Evidence of insurance as respects to Statutory Bond coverage for Theresa Mulvenna - Tax/Utility Collector, Eff: 08/01/2017; Cheryl Slack - Library Treasurer, Eff: 01/01/2007; and Robert Law - Treasurer(CFO), Eff: 07/18/2019