

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/7/2024

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.

PRODUCER License # 0C36861 San Marcos - Escondido								CONTACT Chad Evans PHONE (A/C, No, Ext): (619) 816-3740  FAX (A/C, No):						
														277 Rancheros Dr, Ste 300 San Marcos, CA 92069
INSURER(S) AFFORDING COVERAGE														
INSURER A : Continental Insurance Company														
INSURER B : Technology Insurance Company Inc														
Hadronex, Inc. dba: SmartCover Systems 2110 Enterprise Escondido, CA 92029								INSURER C:					42376	
								INSURER D :						
								INSURER E :						
								INSURER F:						
CO	VER	AGES		CER	TIFIC	CATI	E NUMBER:	REVISION NUMBER:					l	
			TH				SURANCE LISTED BELOW H	HAVE BE	EN ISSUED T			HE P	OLICY PERIOD	
IN	DICA	ATED. NOTWITI	HS1	TANDING ANY F	REQU	IREM	ENT, TERM OR CONDITION	N OF AN	Y CONTRAC	CT OR OTHER	R DOCUMENT WITH RESPE	CT T	O WHICH THIS	
E	=RII KCLU	FICATE MAY BE JSIONS AND COI	= IS NDI	TIONS OF SUCH	POLI	CIES.	, THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	DED BY BEEN RE	THE POLICI	ES DESCRIB PAID CLAIMS.	ED HEREIN IS SUBJECT T	O ALI	L THE TERMS,	
INSR LTR		TYPE OF IN				SUBR				POLICY EXP (MM/DD/YYYY)	LIMIT	s		
Α	Х	COMMERCIAL GEI	NER	AL LIABILITY	IIIOD	1		\`		(11111)	EACH OCCURRENCE	\$	1,000,000	
İ		CLAIMS-MADE X OCCUR			X	7018210531			2/2/2024	2/2/2025	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000	
			_		^						MED EXP (Any one person)	\$	15,000	
											PERSONAL & ADV INJURY	\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:										GENERAL AGGREGATE	\$	2,000,000	
	POLICY X PRO-										PRODUCTS - COMP/OP AGG	\$	2,000,000	
		OTHER:									POL AGG LIMIT	\$	25,000,000	
Α	AUTOMOBILE LIABILITY  X ANY AUTO					BUA 7018210545			2/2/2024	2/2/2025	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
					Х			BODILY INJURY (Per person)			\$			
		OWNED AUTOS ONLY		SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$		
		HIRED AUTOS ONLY		NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
												\$		
Α		WMBRELLA LIAB X OCCUR X EXCESS LIAB CLAIMS-MADE							2/2/2024	2/2/2025	EACH OCCURRENCE	\$	2,000,000	
	X						CUE 7018210528				AGGREGATE	\$	2,000,000	
	DED X RETENTION \$ 10,000				)						\$			
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY										X PER OTH- STATUTE ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE				N/A	TWC4416955		4/1/20	4/1/2024	4/1/2025	E.L. EACH ACCIDENT	\$	1,000,000	
	OFFICER/MEMBER EXCLUDED?										E.L. DISEASE - EA EMPLOYEE	\$	1,000,000	
	DES	s, describe under CRIPTION OF OPER	ATIO	ONS below							E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
DES	CRIPT	ION OF OPERATION	IS/I	LOCATIONS / VEHIC	LES (	ACORI	D 101, Additional Remarks Schedu espects to General Liability	ule, may be a	attached if more	e space is require	ed) d by written contract or a	areer	nent	
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**CERTIFICATE HOLDER** 

CANCELLATION

City of Clearwater 600 Cleveland St Clearwater, FL 33755 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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## Blanket Additional Insured - Owners, Lessees or Contractors with Products-Completed Operations Coverage Endorsement

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

It is understood and agreed as follows:

- WHO IS AN INSURED is amended to include as an Insured any person or organization whom you are required by written contract to add as an additional insured on this Coverage Part, but only with respect to liability for bodily injury, property damage or personal and advertising injury caused in whole or in part by your acts or omissions, or the acts or omissions of those acting on your behalf:
  - A. In the performance of your ongoing operations subject to such written contract; or
  - B. In the performance of your work subject to such written contract, but only with respect to bodily injury or property damage included in the products-completed operations hazard, and only if:
    - 1. The written contract requires you to provide the additional insured such coverage; and
    - 2. This Coverage Part provides such coverage; and
  - C. Subject always to the terms and conditions of this policy, including the limits of insurance, the Insurer will not provide such additional insured with:
    - 1. Coverage broader than what you are required to provide by the written contract; or
    - A higher limit of insurance than what you are required to provide by the written contract.

Any coverage granted by this Paragraph I. shall apply solely to the extent permissible by law.

If the written contract requires additional insured coverage under the 07-04 edition of CG2010 or CG2037, then paragraph **I.** above is deleted in its entirety and replaced by the following:

WHO IS AN INSURED is amended to include as an Insured any person or organization whom you are required by written contract to add as an additional insured on this Coverage Part, but only with respect to liability for bodily injury, property damage or personal and advertising injury caused in whole or in part by your acts or omissions, or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations subject to such written contract; or
- B. In the performance of your work subject to such written contract, but only with respect to bodily injury or property damage included in the products-completed operations hazard, and only if:
  - 1. The written contract requires you to provide the additional insured such coverage; and
  - 2. This Coverage Part provides such coverage.
- **III.** But if the written contract requires:
  - A. Additional insured coverage under the 11-85 edition, 10-93 edition, or 10-01 edition of CG2010, or under the 10-01 edition of CG2037; or
  - **B.** Additional insured coverage with "arising out of" language;

then paragraph **I.** above is deleted in its entirety and replaced by the following:

WHO IS AN INSURED is amended to include as an Insured any person or organization whom you are required by written contract to add as an additional insured on this Coverage Part, but only with respect to liability for bodily injury, property damage or personal and advertising injury arising out of your work that is subject to such written contract.



CNA75079XX (3-22) Policy No: 7018210531 Page 1 of 3 Endorsement No: Effective Date: 02/02/2024 The Continental Insurance Co.

Insured Name: HADRONEX, INC.





## Blanket Additional Insured - Owners, Lessees or Contractors with Products-Completed Operations Coverage Endorsement

IV. But if the written contract requires additional insured coverage to the greatest extent permissible by law, then paragraph I. above is deleted in its entirety and replaced by the following:

WHO IS AN INSURED is amended to include as an Insured any person or organization whom you are required by written contract to add as an additional insured on this Coverage Part, but only with respect to liability for bodily injury, property damage or personal and advertising injury arising out of your work that is subject to such written contract.

- V. The insurance granted by this endorsement to the additional insured does not apply to **bodily injury**, **property** damage, or personal and advertising injury arising out of:
  - A. The rendering of, or the failure to render, any professional architectural, engineering, or surveying services, including:
    - 1. The preparing, approving, or failing to prepare or approve maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; and
    - 2. Supervisory, inspection, architectural or engineering activities; or
  - B. Any premises or work for which the additional insured is specifically listed as an additional insured on another endorsement attached to this Coverage Part.
- VI. Under COMMERCIAL GENERAL LIABILITY CONDITIONS, the Condition entitled Other Insurance is amended to add the following, which supersedes any provision to the contrary in this Condition or elsewhere in this Coverage Part ·

### **Primary and Noncontributory Insurance**

With respect to other insurance available to the additional insured under which the additional insured is a named insured, this insurance is primary to and will not seek contribution from such other insurance, provided that a written **contract** requires the insurance provided by this policy to be:

- 1. Primary and non-contributing with other insurance available to the additional insured; or
- 2. Primary and to not seek contribution from any other insurance available to the additional insured.

But except as specified above, this insurance will be excess of all other insurance available to the additional insured.

VII. Solely with respect to the insurance granted by this endorsement, the section entitled COMMERCIAL GENERAL **LIABILITY CONDITIONS** is amended as follows:

The Condition entitled Duties In The Event of Occurrence, Offense, Claim or Suit is amended with the addition of the following:

Any additional insured pursuant to this endorsement will as soon as practicable:

- 1. Give the Insurer written notice of any claim, or any occurrence or offense which may result in a claim;
- 2. Send the Insurer copies of all legal papers received, and otherwise cooperate with the Insurer in the investigation, defense, or settlement of the claim; and
- 3. Make available any other insurance, and endeavor to tender the defense and indemnity of any claim to any other insurer or self-insurer, whose policy or program applies to a loss that the Insurer covers under this coverage part. However, if the written contract requires this insurance to be primary and non-contributory, this paragraph 3. does not apply to other insurance under which the additional insured is a named insured.

The Insurer has no duty to defend or indemnify an additional insured under this endorsement until the Insurer receives written notice of a claim from the additional insured.

CNA75079XX (3-22) Page 2 of 3 The Continental Insurance Co. Insured Name: HADRONEX, INC.

**Endorsement No:** Effective Date: 02/02/2024

7018210531

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Policy No:





# Blanket Additional Insured - Owners, Lessees or Contractors - with Products-Completed Operations Coverage Endorsement

**VIII.** Solely with respect to the insurance granted by this endorsement, the section entitled **DEFINITIONS** is amended to add the following definition:

**Written contract** means a written contract or written agreement that requires you to make a person or organization an additional insured on this **Coverage Part**, provided the contract or agreement:

- **A.** Was executed prior to:
  - 1. The bodily injury or property damage; or
  - 2. The offense that caused the **personal and advertising injury**;

for which the additional insured seeks coverage; and

**B.** Is still in effect at the time of the **bodily injury** or **property damage occurrence** or **personal and advertising injury** offense.

All other terms and conditions of the Policy remain unchanged.

This endorsement, which forms a part of and is for attachment to the Policy issued by the designated Insurers, takes effect on the effective date of said Policy at the hour stated in said Policy, unless another effective date is shown below, and expires concurrently with said Policy.



7018210531

Policy No:







### ADDITIONAL INSURED - PRIMARY AND NON-CONTRIBUTORY

It is understood and agreed that this endorsement amends the BUSINESS AUTO COVERAGE FORM as follows:

#### **SCHEDULE**

### Name of Additional Insured Person Or Organization

ANY PERSON OR ORGANIZATION THAT YOU ARE REQUIRED BY WRITTEN CONTRACT OR WRITTEN AGREEMENT TO NAME AS AN ADDITIONAL INSURED.

- 1. In conformance with paragraph A.1.c. of Who Is An Insured of Section II LIABILITY COVERAGE, the person or organization scheduled above is an insured under this policy.
- 2. The insurance afforded to the additional insured under this policy will apply on a primary and non-contributory basis if you have committed it to be so in a written contract or written agreement executed prior to the date of the "accident" for which the additional insured seeks coverage under this policy.

All other terms and conditions of the policy remain unchanged

This endorsement, which forms a part of and is for attachment to the policy issued by the designated Insurers, takes effect on the Policy Effective date of said policy at the hour stated in said policy, unless another effective date (the Endorsement Effective Date) is shown below, and expires concurrently with said policy.

Form No: CNA71527XX (10-2012) **Endorsement Effective Date:** 

**Endorsement Expiration Date:** 

Endorsement No: 25; Page: 1 of 1

Underwriting Company: Continental Casualty Company, 151 N Franklin St, Chicago, IL 60606

Policy No: BUA 7018210545 Policy Effective Date: 02/02/2024

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