



DATE 1/14/2016

# CERTIFICATE OF COVERAGE

**PROGRAM SPONSOR**  
 VSBIT MULTI-LINE INTERMUNICIPAL SCHOOL PROGRAM  
 52 PIKE DRIVE  
 BERLIN, VT 05602  
 802.223.6132

**COVERED MEMBER**  
 ORANGE SOUTHWEST SUPERVISORY UNION  
 its schools and its school districts,  
 24 CENTRAL STREET  
 RANDOLPH VT 05060

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE COVERAGE DOCUMENTS BELOW.**

**COVERAGES**

THE COVERAGE DOCUMENTS LISTED BELOW HAVE BEEN ISSUED TO THE COVERED MEMBER NAMED ABOVE FOR THE COVERAGE 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 COVERAGE AFFORDED BY THE COVERAGE DOCUMENTS DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH COVERAGE DOCUMENTS. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF COVERAGE	COVERAGE DOCUMENT NUMBER	COVERAGE EFFECTIVE DATE (MM/DD/YYYY)	COVERAGE EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  <input checked="" type="checkbox"/> GARAGE LIABILITY INCLUDED	VSBITCGL2015	07/01/2015	07/01/2016	EACH OCCURRENCE	\$ 5,000,000
				DAMAGE TO RENTED PREMISES (Each occurrence)	\$ 1,000,000
				MEDICAL EXPENSE (Any one person)	\$ 25,000
				PERSONAL & ADV INJURY	\$ 5,000,000
				GENERAL AGGREGATE	\$ 5,000,000
				PRODUCTS-COMP/OP AGG	\$ INCLUDED
<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> OWNED/LEASED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	VSBITAL2015	07/01/2015	07/01/2016	COMBINED SINGLE LIMIT (each accident)	\$ 5,000,000
				BODILY INJURY (Per person)	
				BODILY INJURY (Per accident)	
				PROPERTY DMG (Per accident)	
<b>AUTO PHYSICAL DAMAGE</b> <input checked="" type="checkbox"/> OWNED/LEASED AUTOS <input checked="" type="checkbox"/> AUTOS IN YOUR CARE FOR WHICH YOU ARE LEGALLY LIABLE	VSBITPR2015	07/01/2015	07/01/2016	ACTUAL CASH VALUE LESS	
				<input checked="" type="checkbox"/> COMP DEDUCTIBLE \$ 500	
<b>SCHOOL LEADERS ERRORS &amp; OMISSIONS</b> <input checked="" type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR	VSBITELL2015	07/01/2015	07/01/2016	EACH OCCURRENCE	\$ 5,000,000
				AGGREGATE	\$ 5,000,000
<b>WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY</b>	VSBITWC2015	07/01/2015	07/01/2016	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	
				E.L. Each Accident	\$ 1,000,000
				E.L. DISEASE-EA EMPLOYEE	\$ 1,000,000
<b>PROPERTY</b>	VSBITPR2015	07/01/2015	07/01/2016	E.L. DISEASE-POLICY LIMIT	\$ 1,000,000
				REPLACEMENT COST VALUATION. SPECIAL RISK CAUSES OF LOSS.	On File with VSBIT

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS**  
 See Attached...

**CERTIFICATE HOLDER**

**CANCELLATION**

Vermont Food Bank  
 33 Parker Road  
 Barre VT 05641

SHOULD ANY OF THE ABOVE DESCRIBED COVERAGES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE PROGRAM SPONSOR WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE SERVICE PROVIDER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

**DESCRIPTIONS Continued.**

As per above referenced VSBIT Coverage Documents 2015

Vermont Food Bank is included as additional member with regards to the general liability pertaining to visit from the RTCC Ag Tech Program on January 19th and January 28th.