POLICY NUMBER: RHS6076498 24 COMMERCIAL GENERAL LIABILITY Named Insured: Two Rivers Agility Club of Sacramento (TRACS)
Policy Effective: 7/1/2025 Policy Expiration Date: 7/1/2026

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

**SCHEDULE** 

Name Of Additional Insured Person(s) Or Organization(s): #2 - \$50

Murieta Equestrian Center 7200 Lone Pine Drive Rancho Murieta, CA 95683

A. Section II - Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, 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:

- 1. In the performance of your ongoing operations; or
- In connection with your premises owned by or rented to you.

## However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III - Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

<sup>\*\*</sup>USING CLUB DESIGNATED AREAS THROUGHOUT THE POLICY PERIOD FOR ORGANIZED DOG CLUB ACTIVITIES.



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/28/2025

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 lieu of such endorsement(s).

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PRODUCER						CT					
Sportsmen's Insurance Agency PO Box #799					PHONE (A/C, No, Ext): (929) 294-7297 FAX (A/C, No):						
ro box #799 Cape Vincent, NY 13618-0799					E-MAIL ADDRESS: info@sportsmensinsurance.com						
					INSURER(S) AFFORDING COVERAGE NAIC #						
					INSURE	RA: Hanove			***************************************	22292	
INSURED					INSURE	INSURER B:					
Two Rivers Agility Club of Sacramento (TRACS) PO Box 855					INSURE	INSURER C:					
					INSURE	INSURER D:					
Diamond Springs, CA 95619					INSURER E :						
					INSURER F:						
COVERAGES CERTIFICATE NUMBER:					REVISION NUMBER:						
C	HIS IS TO CERTIFY THAT THE POLICI DICATED. NOTWITHSTANDING ANY F ERTIFICATE MAY BE ISSUED OR MAY (CLUSIONS AND CONDITIONS OF SUCH	PER POLI	IREMI TAIN, CIES.	ENT, TERM OR CONDITION THE INSURANCE AFFORN LIMITS SHOWN MAY HAVE	N OF A	NY CONTRAC	CT OR OTHER IES DESCRIB PAID CLAIMS.	DOCUMENT WITH RESPE	ECT TO	WHICH THIS	
NSR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	'S		
A	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	2,000,000	
	CLAIMS-MADE X OCCUR	X		RHS6076498 24		7/1/2025	7/1/2026	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000	
								MED EXP (Any one person)	\$	5,000	
				T				PERSONAL & ADV INJURY	\$	2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	4,000,000	
	X POLICY JEC LOC							PRODUCTS - COMP/OP AGG	\$	4,000,000	
	OTHER:	-	ļ		·			COMBINED SINGLE LIMIT	\$		
	AUTOMOBILE LIABILITY							(Es accident)	\$		
	ANY AUTO OWNED SCHEDULED AUTOS ONLY AUTOS			1.00 × 1.				BODILY INJURY (Per person)	\$		
								BODILY INJURY (Per accident) PROPERTY DAMAGE	\$		
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY				1			PROPERTY DAMAGE (Per accident)	\$		
	UMBRELLA LIAB OCCUR	<del> </del>	-						\$		
	EXCESS LIAB CLAIMS-MADE							EACH OCCURRENCE	\$		
	DED RETENTION\$							AGGREGATE	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	-	$\vdash$					PER OTH- STATUTE ER	\$		
										***************************************	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				E.L. EACH ACCIDENT	\$	***************************************	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT		***************************************	
	DESCRIPTION OF OPERATIONS BEIOW							E.L. DISEASE - POLICY LIMIT	3		
		***************************************			-						
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (/	ACORE	) 101, Additional Remarks Schedu	le, may b	e attached if mor	e space is requir	ed)			
						-					
CERTIFICATE HOLDER						CANCELLATION					
Murieta Equestrian Center 7200 Lone Pine Drive Rancho Murieta, CA 95683					SHO THE	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  May L Hy						

ACORD 25 (2016/03)

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