



CERTIFICATE OF MARINE / ENERGY INSURANCE

DATE (MM/DD/YYYY)
3/30/2022

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).

PRODUCER Arthur J. Gallagher Risk Management Services, Inc. 12444 Powerscourt Drive Saint Louis MO 63131		CONTACT NAME: Charleen Sudholt PHONE (A/C, No, Ext): 314-800-2210 FAX (A/C, No): 866-204-5979 E-MAIL ADDRESS: Charleen_Sudholt@ajg.com PRODUCER CUSTOMER ID #:	
License#: BR-724491		INSURER(S) AFFORDING COVERAGE	
INSURED Summerwind Yacht Charters 9225 SE10th Street Pompano Beach FL 33060		INSURER A: Great American Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 16691	

COVERAGES

CERTIFICATE NUMBER: 1690275972


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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	HULL AND MACHINERY			OMH801292812	3/3/2022	3/3/2023	X	PER SCHEDULE ON FILE
	<input type="checkbox"/> COLLISION LIABILITY							INSURED VALUE \$
	<input type="checkbox"/> TOWERS LIABILITY							COLLISION (Ea occurrence) \$
								TOWERS (Ea occurrence) \$
								\$
A	PROTECTION AND INDEMNITY			OMH801292812	3/3/2022	3/3/2023		PER CLUB RULES
	<input checked="" type="checkbox"/> CREW LIABILITY <input checked="" type="checkbox"/> JONES ACT						X	EA OCCURRENCE PER VESSEL, CSL \$ 1,000,000
	<input checked="" type="checkbox"/> COLLISION LIABILITY							COLLISION (Ea occ), CSL \$ 1,000,000
	<input type="checkbox"/> TOWERS LIABILITY							TOWERS (Ea occ), CSL \$
	<input type="checkbox"/> REMOVAL OF WRECK							REMOVAL OF WRECK (Ea occurrence) \$
	<input type="checkbox"/> IN REM							\$
								\$
								\$
								\$
	POLLUTION LIABILITY							EA OCCURRENCE \$
	<input type="checkbox"/> OPA 90							\$
	<input type="checkbox"/> CERCLA							\$
	<input type="checkbox"/> NON-OPA / NON-CERCLA							\$
								\$
	MARITIME EMPLOYERS LIABILITY	N / A						ANY ONE PERSON \$
	<input type="checkbox"/> ALTERNATE EMPLOYER							ANY ONE ACCIDENT \$
	INCLUDES <input type="checkbox"/> CREW <input type="checkbox"/> EMPS							\$
	<input type="checkbox"/> JONES ACT							\$
	<input type="checkbox"/> DEATH ON THE HIGH SEAS							\$
	<input type="checkbox"/> IN REM ENDORSEMENT							\$
								\$
								\$
								\$

CERTIFICATE HOLDER

CANCELLATION

Proof of Insurance	SHOULD ANY OF THE 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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