

## Public Records Request #6301

The following materials have been gathered in response to public records request #6301. These materials include:

- Certificate of Liability Insurance – Blythe Development Co.

This information was provided as a response to a public records request on 10/12/21 and is current to that date. There is a possibility of more current information and/or documents related to the stated subject matter.

### Further Information

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For further information about this request or the Citywide Records Program, please contact:

Cheyenne Flotree  
Citywide Records Program Manager  
City of Charlotte/City Clerk's Office  
600 East 4<sup>th</sup> Street, 7<sup>th</sup> Floor  
Charlotte, NC 28202  
Cheyenne.Flotree@charlottenc.gov

Amelia Knight  
Public Records Specialist  
City of Charlotte/City Clerk's Office  
600 East 4<sup>th</sup> Street, 7<sup>th</sup> Floor  
Charlotte, NC 28202  
Amelia.Knight@charlottenc.gov



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/26/2019

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 any rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Cameron M Harris & Co, LLC Div USI Ins 6100 Fairview Road Charlotte, NC 28210	<b>CONTACT NAME:</b> Andrew Satterfield <b>PHONE (A/C, No, Ext):</b> 980-265-5826 <b>E-MAIL ADDRESS:</b> andrew.satterfield@usi.com	<b>FAX (A/C, No):</b> 888-364-1213
	INSURER(S) AFFORDING COVERAGE	
<b>INSURED</b> Blythe Development Co. 1415 East Westinghouse Blvd. Charlotte, NC 28273	INSURER A : Greenwich Insurance Company	<b>NAIC #</b> 22322
	INSURER B : XL Specialty Insurance Company	<b>37885</b>
	INSURER C : XL Insurance America, Inc.	<b>24554</b>
	INSURER D : Indian Harbor Insurance Company	<b>36940</b>
	INSURER E : INSURER F :	

**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
A	COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR Ded:25,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X	X	CGS7409708	06/01/2018	06/01/2019	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	X	X	CAH7409709	06/01/2018	06/01/2019	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	UMBRELLA LIAB EXCESS LIAB DED <input checked="" type="checkbox"/> RETENTION \$10000	X	X	US00084556LI18A	06/01/2018	06/01/2019	EACH OCCURRENCE \$19,000,000 AGGREGATE \$19,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		X	CWG7409707	06/01/2018	06/01/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
D	Pollution Liab			CEO7446200	06/01/2018	06/01/2019	\$2,000,000/\$2,000,000
D	Professional Liab			CEO7446200	06/01/2018	06/01/2019	\$2,000,000/\$2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Name Insureds: Blythe Development Co.; Blythe Brothers Asphalt Co., LLC and Blythe Brothers Equipment Co., Blythe Brother's Contracting, LLC

Certificate Holder is included as an Additional Insured with respect to General Liability, Automobile Liability, and Umbrella Liability if required by written contract.  
 (See Attached Descriptions)

<b>CERTIFICATE HOLDER</b>  City of Charlotte-E&PM Dept. Attn:Donna Johnson, 12th Floor 600 East Fourth Street Charlotte, NC 28202-2844	<b>CANCELLATION</b>  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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## DESCRIPTIONS (Continued from Page 1)

Additional Insured status for General Liability, Automobile Liability, and Umbrella Liability is primary and non contributory if required by written contract.

Waiver of Subrogation applies in favor of Certificate Holder for General Liability, Automobile Liability, Worker's Compensation, and Umbrella Liability if required by written agreement.

30 day notice of cancellation is provided per the below endorsement forms if required by written contract.

Forms are available upon request.

**General Liability:**

CG2010 4/13 and CG2037 4/13 Blanket Additional Insured (Includes Ongoing and Completed Operations and Primary/Non-Contributory)

CG2404 5/9 Blanket Waiver of Subrogation

IXI405 9/10 30 day Notice of Cancellation for 3rd parties

**Automobile Liability:**

XIC411 10/13 and CA0444 10/13 Blanket Additional Insured and Waiver of Subrogation

CA 0449 11/16 Blanket Additional Insured - Primary/Non-contributory

IXI405 9/10 30 day Notice of Cancellation for 3rd parties

**Workers Compensation:**

WC000313 04/84 Blanket Waiver of Subrogation

WC990110 1/8 60 day Notice of Cancellation for 3rd parties

**Umbrella Liability:**

CG2010 4/13 and CG2037 4/13 Blanket Additional Insured including Primary/ Non-contributory

IXI405 9/10 30 day Notice of Cancellation for 3rd parties

Re: Alanhurst/ Cherrycrest SDIP

Project Number: 671-16-006

Contract Number: 2019000991

City of Charlotte is included as additional insured for general liability per written contract.