Client#: 1115734 WESTVIR24

ACORD...

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/09/2024

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. 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).

this certificate does not content any rights to the certificate holder in fled of such endorsement(s).							
PRODUCER	CONTACT Cathie Barry						
USI Ins Svcs C/L Charleston	PHONE (A/C, No, Ext): 304 238 5559 FAX (A/C, No): 86	6 617 3260					
300 Kanawha Blvd. East, Suite 300	E-MAIL ADDRESS: cathie.barry@usi.com						
Charleston, WV 25301	INSURER(S) AFFORDING COVERAGE	NAIC #					
304 347-0611	INSURER A : BrickStreet Mutual Insurance Company	12372					
INSURED Was a Manual of the second of the se	INSURER B:						
West Virginia University	INSURER C:						
Attention: Kelsey Knotts	INSURER D:						
Post Office Box 6209	INSURER E:						
Morgantown, WV 26506	INSURER F:						
COVERACES CERTIFICATE NUMBER.	DEVICION NUMBER.						

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	SR TYPE OF INSURANCE				ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY								EACH OCCURRENCE	\$	
	CLAIMS-MADE OCCUR			OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
				_						MED EXP (Any one person)	\$
										PERSONAL & ADV INJURY	\$
	GEN'L AGGREGATE LIMIT APPLIES PER:			PLIES PER:						GENERAL AGGREGATE	\$
	POLICY	PRO- JECT		LOC						PRODUCTS - COMP/OP AGG	\$
	OTHER:										\$
	AUTOMOBILE LIABILITY									COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO								BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS								BODILY INJURY (Per accident)	\$	
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
											\$
	UMBRELLA LIAB OCCUR								EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE								AGGREGATE	\$	
	DED RETENTION \$								\$		
Α	WORKERS COMP						WCB1019700	07/01/2024	07/01/2025	X PER OTH- STATUTE ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Nandatory in NH)			EXECUTIVE N	ECUTIVE					E.L. EACH ACCIDENT	\$100,000
				/: <u>IN</u>	1177		E.L. DISEASE - EA EMPLOYEE			\$100,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below									E.L. DISEASE - POLICY LIMIT	\$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Named Insured on Dec Page: West Virginia University

Insured Multiple Names: West Virginia University Research Corporation

Potomac State College of West Virginia University West Virginia University Institute of Technology

West Virginia University of Parkersburg

(See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION			
West Virginia University One Waterfront Place PO Box 6209	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
Morgantown, WV 26506	AUTHORIZED REPRESENTATIVE			
	James P. Crouse			
	6 4000 0045 ACORD CORROBATION All sinks assessed			

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	DESCRIPTIONS (Continued from Page 1)
Evidence of Coverage	