

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/13/2021

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 be endorsed. If SUBROGATION IS WAIVED, subject to

the terms and conditions of the polic certificate holder in lieu of such endo				ndorsement. A s	tatement on th	is certificate does not con	ıfer riç	ghts to the	
PRODUCER		(0)	-	CONTACT NAME: Janet Nau					
The Partners Group Ltd				PHONE (A/C, No, Ext): 425-455-5640 (A/C, No): 425-455-6727					
11225 SE 6th St., Suite 110 Bellevue WA 98004				I E-MAIL					
Donovae VIA Dood4								NAIC#	
				INSURER(s) AFFORDING COVERAGE INSURER A : T.H.E. Insurance Company				12866	
INSURED			14372					12000	
Ace Pyro, LLC				INSURER B:					
13001 E. Austin Rd Manchester MI 48158				INSURER C:				- · · · · · · · · · · · · · · · · · · ·	
Wandlester Wi 40100	INSURER D:								
	INSURER E:								
COVERAGES CE	RTIFI	CATE	NUMBER: 1331967091	INSURER F : REVISION NUMBER;					
THIS IS TO CERTIFY THAT THE POLICIE				VE BEEN ISSUED	TO THE INSURE		POLI	CY PERIOD	
INDICATED. NOTWITHSTANDING ANY F CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUC	EQUIF	REME TAIN,	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF ANY CONTRA	CT OR OTHER CIES DESCRIBE	DOCUMENT WITH RESPECT D HEREIN IS SUBJECT TO .	r to v	HICH THIS	
INICO		SUBR WYD		POLICY EFF POLICY EXP					
LTR TYPE OF INSURANCE A GENERAL LIABILITY	INSR Y	WVD	POLICY NUMBER CPP010442906	(MM/DD/YY) 11/1/2020			1 4 000 -	00	
X COMMERCIAL GENERAL LIABILITY	ľ		OF F0 10442500	1 11 11 2020	, , , , , , , , , , , , , , , , , , , ,	DAMAGE TO RENTED	0,000,0 100,000		
CLAIMS-MADE X OCCUR						MED EXP (Any one person) \$	Exclude	ed	
			Į į			PERSONAL & ADV INJURY \$	1,000,0	00	
						GENERAL AGGREGATE \$	10,000,	000	
GEN'L AGGREGATE LIMIT APPLIES PER:	-					PRODUCTS - COMP/OP AGG \$	2,000,0	00	
X POLICY PRO- JECT LOC					_	\$	\$		
AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$			
ANY AUTO						BODILY INJURY (Per person) \$			
ALL OWNED SCHEDULED AUTOS AUTOS						BODILY INJURY (Per accident) \$	6		
HIRED AUTOS AUTOS						PROPERTY DAMAGE (Per accident)	5		
70100		1				3	\$		
A UMBRELLA LIAB X OCCUR			ELP001174706	11/1/2020	11/1/2021	EACH OCCURRENCE \$	9,000,0	00	
X EXCESS LIAB CLAIMS-MAD	E					AGGREGATE \$	9,000,0	00	
DED RETENTION\$	7					\$ GL C		LY	
WORKERS COMPENSATION						WC STATU- OTH- TORY LIMITS ER			
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE	7 I					E.L. EACH ACCIDENT \$	\$		
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)] N/A	1			1	E.L. DISEASE - EA EMPLOYEE \$	\$		
If yes, describe under DESCRIPTION OF OPERATIONS below				İ		E.L. DISEASE - POLICY LIMIT \$	\$		
Section 11011 5. Of Electrical Scient		T^{-}			<u> </u>				
					:				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) The following are included as Additional Insured on General Liability as their interest may appear as respects operations performed by or on behalf of the Named Insured, as required by written contract:									
Additional Insured: Charlotte Public Schools and their affiliates and members. Display Location: Baseball Field at 378 State St Charlotte, MI									
Display Date: October 15, 2021									
	CANCELLATION								
CERTIFICATE HOLDER				CANCELLATI	CANCELLATION				
Charlotte Public Schools	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.								
378 State St.	AUTHORIZED REPRESENTATIVE								
Charlotte, MI 48813									

2021 Permit for Fireworks Other than Consumer or Low Impact

Authority: 2011 PA 256	The LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD of color, marital status, disability, or political beliefs. If you need assistance we make your needs known to this Legislative Body of City, Village or Township.	ith reading, writing, hearing, etc., un	idual or group because of race, sex. religion, age, der the Americans with Disabilities Act, you may
This permit is not transferable. Pos the purpose of and at the place liste	session of this permit authorizes the herein named personed below only through permit expiration date.	n to possess, transport and	display fireworks in the amounts, for
TYPE OF PERMIT(S) (Select all a	applicable boxes)		FOR USE BY LEGISLATIVE BODY OF
Agricultural or Wildlife Firework	CITY, VILLAGE OR TOWNSHIP BOARD ONLY.		
Public Display	PERMIT(S) EXPIRATION DATE (ENTER DATE OF EXPIRATION)		
Special Effects Manufactured for	or Outdoor Pest Control or Agricultural Purposes		
NAME OF PERSON PERMIT ISSUED TO	Matt Jenca		AGE (18 YEARS OR OLDER) ☑ YES □ NO
ADDRESS OF PERSON PERMIT ISSUED T	9700 Burmeister Rd, Saline, MI 48176		
NAME OF ORGANIZATION, GROUP, FIRM	ACE Pyro, LLC		
9700 Burmeister F	Rd, Saline, MI 48176	. /	
NUMBER AND TYPES OF FIREWORKS (PI		1/0	TELLOS
	Aerial Display Shells Ranging From 1" to 6	"	Issue's Have Made the and be on Stad-by
3-5 - Display Cakes		11/	II M. L
		VVe i	Have Mace
		01	
		Conta	ede and
		/11	1 1 1
		Will	be on Stal-by
		_	Tw -
	,		1 kges
EXACT LOCATION OF DISPLAY OR USE			
Topic Control	Charlotte High School 378 State St. Charle		TIME
CITY, VILLAGE, TOWNSHIP Charlot	te, MI	10/15/2021	TBD
BOND OR INSURANCE FILED			AMOUNT
VES NO			\$10,000,000
Issued by action of the Legislativ	e Body of a		
		, Hh	0.11 2021
City Village Towns	nip of Marlattle on the	41	day of October 2021
Manage Mia	Macl Armstagge (Signature and Title of Legislative Body Representation)	entative)	
Mayor, Mic		DIRATION OF PERMIT*	
	*THIS FORM IS VALIDUNTIL THE DATE OF EX	FINALION OF FERMIL	

2021 Application for Fireworks Other Than Consumer or Low Impact

FOR USE BY LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD ONLY

DATE PERMIT(S) EXPIRE:

Authority:

2011 PA 256

The LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this Legislative Body of City, Village or Township Board.

TYPE OF PERMIT(S) (Sele							
Agricultural or Wildlife Fireworks		Articles Pyrotechnic					
Public Display		7 Private Display					
Special Effects Manufac	ctured for Outdoor Pest Control o	or Agricultural Purposes					
NAME OF APPLICANT		ADDRESS OF APPLICANT	AGE OF APPLICANT 18 YEARS OR OLDER ✓ YES ☐ NO				
Matt Jenca		9700 Burmeister Rd, Saline, MI 48176 ADDRESS PERSON OR RESIDENT AGENT REPRESENTING C	·				
NAME OF PERSON OR RESIDENT AGENT REPRESENTING CORPORATION, LLC, DBA OR OTHER							
Aaron Enzer		9700 Burmeister Rd, Saline, MI 48176 ADDRESS (MICHIGAN ATTORNEY OR MICHIGAN RESIDENT TELEPHONE NUMBER					
IF A NON-RESIDENT APPLICANT (LIST NAME OF MICHIGAN ATTORNEY OR MICHIGAN RESIDENT AGENT)		AGENT)	TELEFINAL NOMBER				
NAME OF PYROTECHNIC OPERAT	TOR	ADDRESS OF PYROTECHNIC OPERATOR	AGE OF PYROTECHNIC OPERATOR 18 YEARS OR OLDER				
Matt Jenca		9700 Burmeister Rd, Saline, MI 48176	✓ YES ☐ NO				
NO. YEARS EXPERIENCE	NO. DISPLAYS	WHERE					
12	50+	Michigan and Illinois					
NAME OF ASSISTANT		ADDRESS OF ASSISTANT	AGE OF ASSISTANT 18 YEARS OR OLDER YES □ NO				
NAME OF OTHER ASSISTANT	and a such a suc	ADDRESS OF OTHER ASSISTANT	AGE OF OTHER ASSISTANT 18 YEARS OR OLDER YES				
EXACT LOCATION OF PROPOSET Charlotte High School 3	DISPLAY 78 State St. Charlotte, MI 4	8813					
DATE OF PROPOSED DISPLAY		TIME OF PROPOSED DISPLAY					
10/15/2021		TBD AL FIRE AUTHORITIES, IN ACCORDANCE WITH NFPA 1123, 1124 & 1126 AND OTHER STATE OR FEDERAL REGULATIONS.					
,	CE WIIL DE DROUGHE FOR CO	mpany storage in time for display setup.	ANY				
\$10,000,000	52 (10 52 52) 51 200 A 00 (2.11.11.12.	The Partners Group Ltd					
•	RATION OR INSURANCE COMPANY	The Calabora Group Lia					
11225 SE 6th Street, \$	Suite 110, Bellevue, WA 9		A AMERICAN PART OF THE PART OF				
NUMBER OF FIREWORKS		KIND OF FIREWORKS TO BE DISPLAYED (PIC	rase provide additional pages as needed)				
approx. 500	Assorted Aerial Displ	Assorted Aerial Display Shell Ranging From 1" to 6"					
3-5	Display Cakes						
SIGNATURE OF APPLICANT			DATE 09/14/21				
711 at	Thank Oakaa		00/11/21				
rriace	thew Jenca						