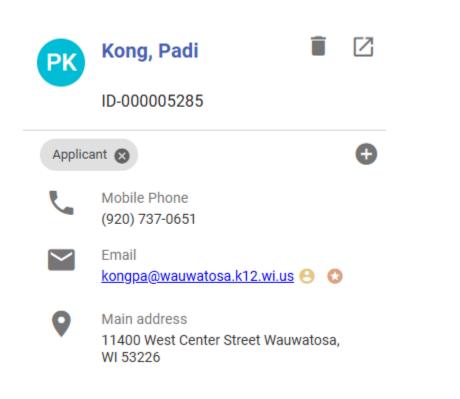
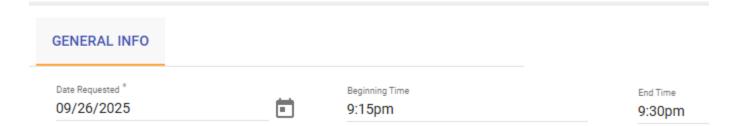
Fire2025-0047 (11400 West Center Street Wauwatosa, WI 53226)

Description

Permit for fireworks for Tosa West Homecoming





-Visit us at www.wolverinefireworks.com

Wauwatosa West High School 9/26/2025

Product List

3-3" Salutes 60-3" Assorted Color Shells 1.3G 60-3" Finale Shells (10/set) 1.3G 16-1.3G/1.4G Low Level Cakes





CERTIFICATE OF LIABILITY INSURANCE

3/25/2025

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 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		CONTACT NAME: Janet Nau				
The Partners Group Ltd 1111 Lake Washington Blvd N. Suite 400 Renton WA 98056		PHONE (A/C, No, Ext): 425-455-5640	FAX (A/C, No): 425-455-6727			
		E-MAIL ADDRESS: jnau@tpgrp.com				
		INSURER(S) AFFORDING COVERAGE	NAIC #			
		INSURER A: Everest Indemnity Insurance Co	10851			
NSURED	14347	ınsurer в : Everest Denali Insurance Company	16044			
Wolverine Fireworks Display, In 205 West Seidlers Road	C.	INSURER c : Arch Specialty Insurance Company	21199			
Kawkawlin MI 48631		INSURER D:				
		INSURER E:				
		INSURER F:				
COVEDAGEO	OFFICIOATE NUMBER: 4445040007	DEVICION NUM	1DED			

COVERAGES CERTIFICATE NUMBER: 1145319637 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	ISR TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
Α	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY	Y		GC10010148251	2/1/2025	2/1/2026	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 500,000
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	\$ Excluded
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$ 2,000,000
	POLICY PRO- JECT LOC							\$
В	AUTOMOBILE LIABILITY			GCD0010062251	2/1/2025	2/1/2026	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	ANY AUTO						BODILY INJURY (Per person)	\$
	ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
								\$
С	X UMBRELLA LIAB OCCUR			UXP104806303	2/1/2025	2/1/2026	EACH OCCURRENCE	\$ 4,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$4,000,000
	DED RETENTION \$							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU- OTH- TORY LIMITS ER	
ANY PROPRIETOR/PARTNER/EXECUTIVE		N/A					E.L. EACH ACCIDENT	\$
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$
С	Excess Liability - Occurrence			GC10010148251	2/1/2025	2/1/2026	Each Occurrence Aggregate	\$5,000,000 \$5,000,000

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 per form ECG 20592 0509 attached:

Display Date: 6/13/2025, 6/14/2025, 9/26/2025

Display Location: Wauwatosa West HS Grounds-11400 W Center St, Wauwatosa WI 53222

Additional Insured(s): Wauwatosa West High School, City of Wauwatosa

CERTIFICATE HOLDER	CANCELLATION
Wauwatosa West High School	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
11400 W. Center St. Wauwatosa WI 53222	AUTHORIZED REPRESENTATIVE Sure Haudh

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