POLICY NUMBER: Q35-0101324

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - MANAGERS OR LESSORS OF PREMISES

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Designation Of Premises (Part Leased To You):	
Name Of Person(s) Or Organization(s) (Additional Insured): City of Harrisonburg - City Managers Office - RE: Rocktown Beer & Music Festival	
Additional Premium: \$	
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability arising out of the ownership, maintenance or use of that part of the premises leased to you and shown in the Schedule and subject to the following additional exclusions:

This insurance does not apply to:

- 1. Any "occurrence" which takes place after you cease to be a tenant in that premises.
- 2. Structural alterations, new construction or demolition operations performed by or on behalf of the person(s) or organization(s) shown in the Schedule.

However:

 The insurance afforded to such additional insured only applies to the extent permitted by law; and

- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B. With respect to the insurance afforded to these additional insureds, the following is added to Section III Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

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Policy Q35-0101324 Declaration effective 11/01/2013

* SEE page 3 AND 4

ERIE INSURANCE EXCHANGE GENERAL LIABILITY POLICY

RENEWAL CERTIFICATE

LD&B INS AND FINANCIAL 11/01/13 TO 11/01/14 Q35 0101324 V

HARRISONBURG & ENDT #1

C/O EDWIN BUMBAUGH

212 S MAIN ST

HARRISONBURG VA 22801-3605

POLICY PERIOD BEGINS AND ENDS AT 12.01 A.M. STANDARD TIME AT THE STATED ADDRESS OF THE NAMED INSURED.

TYPE OF POLICY - OCCURRENCE

BUSINESS TYPE - OTHER

INDEPENDENT CITY

THE ERIE'S LIMIT OF PROTECTION FOR EACH COVERAGE IS STATED BELOW. THIS IS SUBJECT TO ALL APPLICABLE TERMS OF THE POLICY AND ATTACHED FORMS.

LIMITS OF INSURANCE

EACH OCCURRENCE LIMIT

\$1,000,000

DAMAGE TO PREMISES

RENTED TO YOU LIMIT

\$1,000,000 ANY ONE PREMISES

MEDICAL EXPENSE LIMIT

\$ 5,000 ANY ONE PERSON

PERSONAL & ADVERTISING INJURY LIMIT \$1,000,000 ANY ONE PERSON OR ORGANIZATION GENERAL AGGREGATE LIMIT \$2,000,000

PRODUCTS/COMPLETED OPERATIONS AGGREGATE LIMIT INCL IN GENERAL AGGREGATE LIMIT

COVERAGES & PREMIUMS

PREMISES/OPERATIONS

PRODUCTS/COMPLETED OPERATIONS

INCLUDED

OPTIONAL COVERAGES -

ADDITIONAL INSUREDS

TOTAL DEPOSIT PREMIUM - - - - \$ 1,640.

APPLICABLE FORMS - SEE SCHEDULE OF FORMS

SCHEDULE OF INSURED'S OPERATIONS PREMISES/OPERATIONS AND PRODUCTS/COMPLETED OPERATIONS HAZARDS

ARE INCLUDED OR EXCLUDED AS INDICATED BELOW.

LOCATION

INSURED OPERATIONS

1. 345 S MAIN ST, HARRISONBURG, VA

* 041670A - REVITALIZATION

ORGANIZATION - RATED AS CLUBS - CIVIC, SERVICE OR SOCIAL - NO BUILDINGS OR PREMISES OWNED OR LEASED

EXCEPT FOR OFFICE

PURPOSES - NOT-FOR-PROFIT ONLY INCLUDING PRODUCTS -

COMPLETED OPERATIONS

UNFILE - SEVEN EVENTS INCLUDING

HALLOWEEN, BLOCK PARTY IN THE BURG, VALLEY FOURTH, DOWNTOWN TOUR, TEMPTATIONS

AT THE THEATER, ROCKTOWN

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BEER & MUSICAL FESTIVAL &
                                              ROCKTOWN WINE & DINE
                                              FESTIVAL INCLUDING
                                              PRODUCTS - COMPLETED
                                              OPERATIONS
 _______
                        LOCATION 1
                 * 041670A
CLASS CODE
                                    UNFILE
PREMIUM BASES * PER MEMBER
EXPOSURE * 25
                                     FLAT
                                     FLAT
PREMISES/OPERATIONS *
 RATE
                   * .591
                                     FLAT
PREMISES/OPERATIONS *
                  * 210. MINIMUM
 PREMIUM
                                    1,200.
PRODUCTS/COMPLETED *
 OPERATIONS RATE
                  * INCLUDED
                                    INCLUDED
PRODUCTS/COMPLETED *
  OPERATIONS PREMIUM * INCLUDED
                                    INCLUDED
                                                  ERIE INSURANCE EXCHANGE
                                                 GENERAL LIABILITY POLICY
             RENEWAL CERTIFICATE
    DD2286 LD&B INS AND FINANCIAL 11/01/13 TO 11/01/14 Q35 0101324 V
    HARRISONBURG & ENDT #1
    C/O EDWIN BUMBAUGH
    212 S MAIN ST
    HARRISONBURG VA 22801-3605
                    SCHEDULE OF INSURED'S OPERATIONS
PREMISES/OPERATIONS AND PRODUCTS/COMPLETED OPERATIONS HAZARDS
ARE INCLUDED OR EXCLUDED AS INDICATED BELOW.
LOCATION
                                              INSURED OPERATIONS
1. 345 S MAIN ST, HARRISONBURG, VA * 048557A - SOCIAL GATHERINGS AND
                                              MEETINGS-ON PREMISES NOT
                                              OWNED OR OPERATED BY
                                              THE INSURED - OTHER THAN
                                              NOT-FOR-PROFIT INCLUDING
                                              PRODUCTS - COMPLETED
                                              OPERATIONS
                                     UNFILE - RESTAURANT TASTING TOURS
                                              INCLUDING PRODUCTS -
                                              COMPLETED OPERATIONS
                       LOCATION 1
CLASS CODE
                 * 048557A
                                    UNFILE
             * PER LOCATION
* 1
PREMIUM BASES
                                    FLAT
EXPOSURE
                                     FLAT
PREMISES/OPERATIONS *
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	RATE		23.9	51	FLAT			
	PREMISES/OPERAT							
	PREMIUM	*	INCL	JDED	200.			
	PRODUCTS/COMPLE							
	OPERATIONS RA		INCL	DED	INCLUI	DED		
	PRODUCTS/COMPLE							
	OPERATIONS PR	KEMIUM *	INCL		INCLUI	DED		
	FORM NUMBER F	DITION 1	- A III II	SCHEDULE OF	FORMS			
	CGL	03/01	JAIL	COMMEDICATIO		DESCRIPTION		
	UFB250	03/01	_			LIABILITY POLI		
	0FB250	06/13	^				ERCIAL GENERAL	
	CG0001	04/13	_	LIABILITY FO				
	IL0138	11/11				LIABILITY COVE		
	CG0179	07/10		VIRGINIA CHA		ANCELLATION A	ND NONRENEWAL	
	GU32	03/01		EXCLUSION -		ADTI TEN		
	IL0021	09/08					N ENDORSEMENT	
	ULOW	03/01					N ENDORSEMENT NO. TN, VA, WI, W	T T \
	ULED	09/05		EXCLUSION -			O, NC, IN, VA, WI, W	V)
	ULQJ	03/01		EXTRA LIABIL				
	ULON	06/13	*			CONAL LIABILIT	٠v	
	CG2147	12/07				PRACTICES EXCL		
	GUVA	01/07					A POLICYHOLDER	a
	CG2167	12/04		FUNGI OR BAC			A FOLICINOLDER	5
	CG2170	01/08				CERTIFIED ACTS	! ∩₽ TEDDODTCM	
	IL0985*	01/08				TO TERRORISM	OF THRROKING	
		,		RISK INSURAN		10 ILIGIORIDII		
	UF4111	01/10				POLICYHOLDERS	- TERRORISM	
		, –		COVERAGE - L			121110111011	
	UF4810*	03/08				OLICY SERVICE	FEES	
	UF8385	03/95		IMPORTANT NO				
	UF6330*	08/09		IMPORTANT NO	TICE: DO	YOU USE SUBC	ONTRACTORS?	
	IL0017	11/98		COMMON POLIC				
	CG2196	03/05		SILICA OR SI	LICA-REL	ATED DUST EXC	LUSION	
	FORM SA	11/12	*	SUBSCRIBERS :				
	ENDT1			LONG NAMED I	NSURED E	NDORSEMENT		
	CG2002	11/85			-	CLUB MEMBERS		
,	CG2011	04/13		ADDITIONAL I				
,				OR LESSORS O	F PREMIS	ES		
						סדסס	TMCTIDANCE EVOUS	א זאדרי

ERIE INSURANCE EXCHANGE GENERAL LIABILITY POLICY

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C/O EDWIN BUMBAUGH

212 S MAIN ST

HARRISONBURG VA 22801-3605

IMPORTANT - PLEASE READ

YOUR RATE FOR YOUR COMMERCIAL GENERAL LIABILITY POLICY IS DETERMINED BY USING ONE OF THE FOLLOWING BASES OF PREMIUM -

- A) AREA RATES ARE PER 1000 SQUARE FEET OF AREA
- B) PAYROLL RATES ARE PER \$1000 OF PAYROLL
- C) SALES RATES ARE PER \$1000 OF SALES
- D) ADMISSIONS RATES ARE PER 1000 ADMISSIONS
- E) COMMISSIONS RATES ARE PER \$1000 COMMISSIONS
- F) COST RATES ARE PER \$1000 COST
- G) EXPENDITURES RATES ARE PER \$1000 EXPENDITURES
- H) OTHER SEE PREMIUM BASES

ENDORSEMENT 1

IT IS AGREED THAT THE NAMED INSURED SHALL READ AS FOLLOWS - HARRISONBURG DOWNTOWN RENAISSANCE

RECORD OF ADDITIONAL INSUREDS - MANAGERS OR LESSORS OF PREMISES

CITY OF HARRISONBURG
CITY MANAGERS OFFICE
345 S MAIN ST
HARRISONBURG VA 22801-3606
SELLERS REAL ESTATE
64 S COURT SQ
HARRISONBURG VA 22801-3720

COURT SQUARE THEATER
61 GRAHAM ST
HARRISONBURG VA 22801-3739
FIRST PRESBYTERIAN CHURCH
17 N COURT SQ
HARRISONBURG VA 22801-3723
LIBERTY SOUTH ASSOCIATES
276 S LIBERTY ST
HARRISONBURG VA 22801-3633
TASTE A FOOD COMPANY
KIRSTEN PARMER D/B/A
2075 BUTTONWOOD CT
HARRISONBURG VA 22802-6208
24



COUNTY OF ROCKINGHAM PO BOX 1252 HARRISONBURG VA 22803-1252

CALDWELL BANKER
FUNKHOUSER REALTORS
66 S COURT SQ
HARRISONBURG VA 22801-3720
BANK OF AMERICA
57 S MAIN ST
HARRISONBURG VA 22801-3716
JAMES MCHONE JEWELRY
75 S COURT SQ
HARRISONBURG VA 22801-3720
PEPPERJACK CONSULTING
80 S MAIN ST
HARRISONBURG VA 22801-3761

