Sample Certificate of Insurance (COI) The COI must meet ALL mandatory requirements shown in red to exhibit at an Esri event.

DATE (MM/DD/YYYY)

CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AN BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSEPPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLD	STITUTE A CONTRACT DER.	BETWEEN	THE ISSUING INSURE	R(S), AUTHORIZ	
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED the terms and conditions of the policy, certain policies may require certificate holder in lieu of such endorsement(s).	D, the policy(les) must be an endorsement. A sta	e endorsed. Itement on th	If SUBROGATION IS Value to the substantial of the s	WAIVED, subject confer rights to	
PRODUCER	CONTACT				
Insurance provider name and address here.	ONTHIS	NAME: PHONE (A/C, No. Ext): (A/C, No):			
	E-MAIL	(A/C, No. Ext): (A/C, No.): E-MAIL ADDRESS:			
Provider must be registered to do business in the U.S.	\$1.50 for the second se				
Management and the second seco		INSURER A :			
BUREO	The state of the s	INSURER B: INSURER C: INSURER D:			
Your company name or D8A and address* here.	- The second of				
*If you are an international company and do not have a U.S. entity, use the following address: 380 New York Street, Redlands, CA 92373-8100	INSURER D :				
Company name must match exactly name on exhibit application	HSURER E :				
	INSURER F	and the second s	men (n. V.) z m. n. n. V. syll m. n. s. n. syll syll syll statistic mentagy anomaly area for substances may be	Na debianción debianemente como de la como como como como como como como com	
OVERAGES CERTIFICATE NUMBER:			REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELO INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDICERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AF EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY BELOW THE REPORT OF SUCH POLICIES.	FORDED BY THE POLICIE HAVE BEEN REDUCED BY	S DESCRIBE	DOCUMENT WITH RESPE	THE POLICY PERIO ECT TO WHICH THE O ALL THE TERM	
SR TYPE OF INSURANCE ADDLISUER TO POLICY NUM GENERAL LIABILITY POLICY NUM	BER POLICY EFF	POLICY EXP	LIMI	Te l	
A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1		The state of the s	EACH OCCURRENCE	\$1,000,	
COMMICTORY OF MEMORY CHARLES		Must expire	DAMAGE TO RENTED PREMISES (En occumence)	\$1,000,	
CLAIMS-MADE OCCUR Broad Form Property Damage	Policy start	after event	MED EXP (Any one person)	\$5,	
Blanket Contractual	date	end date.	PERSONAL & ADV INJURY	\$1,000,	
GEN'L AGGREGATE LIMIT APPLIES PER:			GENERAL AGGREGATE	\$2,000,	
POLICY PRO- LOC	The state of the s		PRODUCTS - COMP/OP AGG	\$2,000,	
AUTOMOBILE LIABILITY		V-000000000000000000000000000000000000	COMBINED SINGLE LIMIT		
ANY AUTO			(Ea accident)	1.5	
ALL OWNED SCHEDULED AUTOS			BODILY INJURY (Per person) BODILY INJURY (Per accident)	\$	
HIRED AUTOS NON-OWNED AUTOS			PROPERTY DAMAGE	\$	
	Participation of the Control of the		iPer accident)	\$	
UMBRELLA LIAB OCCUR		ACTION OF THE PARTY OF THE PART	EACH OCCURRENCE	\$	
EXCESS LIAB CLAIMS-MADE			AGGREGATE	\$	
DED RETENTIONS	A constant of the constant of		and an experience of the contract of the contr	\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			WC STATU OTH-		
OFFICER/MEMBER EXCLUDED? N/A			E.L. EACH ACCIDENT	\$1,000,0	
(Mandatory in NH) If yes, describe under			E.L. DISEASE - EA EMPLOYEE	\$1,000,0	
DÉSCRIPTION OF OPERATIONS below			E.L. DISEASE - POLICY LIMIT	\$1,000,0	
SCHOOL OF COUNTY OF COUNTY OF COUNTY OF THE PROPERTY OF THE PR	marks Schedule, if more space is	required)			
Zoobilee				2	
				\$00	
Roger Williams Park Zoo					
June 28, 2025					
ERTIFICATE HOLDER	CANCELLATION				
Phodo Island Zaglasias Cariati	SHOULD ANY OF T	HE AROVE DE	SCRIBER BOLICIES DE C	ADJACT A COM PARTY	
Rhode Island Zoological Society	THE EXPIRATION	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN			
The City of Providence	ACCORDANCE WIT	H THE POLICY	PROVISIONS.		
ric city of riovidence	1				
1000 Elmwood Avenue	AUTHORIZED RESPECTE	TATIVE I			
	AUTHORIZED REPRESEN	and the second	written Signature		