



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/24/2025

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 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 rights to the certificate holder in lieu of such endorsement(s).

PRODUCER		CONTACT NAME: Valentina Andreopoulos
Davis-Vandenbossche Agency 51180 Bedford St		PHONE (A/C, No. Ext.): (586) 716-2990
		E-MAIL ADDRESS: vandreopoulos@dvainsurance.com
		INSURER(S) AFFORDING COVERAGE
		INSURER A: Frankenmuth Insurance Co A
		INSURER B: Allmerica Financial Benefit A
		INSURER C:
		INSURER D:
		INSURER E:
		INSURER F:
INSURED		NAIC #
Kavanaugh, Michael P LLC 200 Maple Park Blvd Ste 201		13986
Saint Clair Shores		41840
MI 48047		
MI 48081-2211		

*✓OK!
PA 11/25/25*

COVERAGES		CERTIFICATE NUMBER:		25/26 Master Cert	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	TYPE OF INSURANCE	ADDL INSD	SUBR WWD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY			6668014	12/13/2025	12/13/2026	EACH OCCURRENCE \$ 1,000,000 ✓
	CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/>						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000
A	GEN'L AGGREGATE LIMIT APPLIES PER:						MED EXP (Any one person) \$ 5,000
	POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:						PERSONAL & ADV INJURY \$
A	AUTOMOBILE LIABILITY			6668014	12/13/2025	12/13/2026	GENERAL AGGREGATE \$ 2,000,000
	ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/>						PRODUCTS - COMP/OP AGG \$ 2,000,000
	UMBRELLA LIAB		OCCUR				COMBINED SINGLE LIMIT (Ea accident) \$
	EXCESS LIAB		CLAIMS-MADE				
B	DED RETENTION \$			W2B7591291	08/11/2025	08/11/2026	BODILY INJURY (Per accident) \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						
B	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/>	Y/N	N/A			EACH OCCURRENCE \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						
							\$
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)							

All operations in the State of Michigan are subject to the terms and conditions of the policies issued above.

The City of Grosse Pointe Woods, the 32F Municipal Court, all elected & appointed officials, all employees and volunteers, agents, all boards, commissions and/or authorities and board members, including employees & volunteers thereof are additional insured with respect to general liability on a primary basis. 30 day notice of cancellation applies. ✓

CERTIFICATE HOLDER		CANCELLATION	
City of Gross Pointe Woods 20025 Mack Plaza Dr.		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	
Gross Pointe Woods		AUTHORIZED REPRESENTATIVE	
MI 48236			

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