

Proposal No. 2024M-006EN-001



POWEMAN-02

MALEXANDER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MMDD/YYYY)
10/26/2023

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 License # 1298 Hub International Mid-South 3011 Armory Drive Suite 250 Nashville, TN 37204	CONTACT NAME: Melissa Alexander PHONE (A/C, No., Ext): (615) 986-4282 FAX (A/C, No.): EMAIL ADDRESS: melissa.alexander@hubinternational.com														
INSURED Powers Management, LLC 501 Broadway Nashville, TN 37203	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Arch Insurance Company</td> <td>11150</td> </tr> <tr> <td>INSURER B : Westfield Insurance Company</td> <td>24112</td> </tr> <tr> <td>INSURER C : Great American Assurance Company</td> <td>26344</td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Arch Insurance Company	11150	INSURER B : Westfield Insurance Company	24112	INSURER C : Great American Assurance Company	26344	INSURER D :		INSURER E :		INSURER F :	
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COVERAGES **CERTIFICATE NUMBER:** **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 WVD	POLICY NUMBER	POLICY EFF (MMDD/YYYY)	POLICY EXP (MMDD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER Per Event			SSCGL0009706	7/31/2023	7/31/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 0 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 5,000,000 PRODUCTS - COMP/OP AGG \$ 5,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			SSAUT0014704	7/31/2023	7/31/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			SSFXS0006806	7/31/2023	7/31/2024	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N N/A If yes, describe under DESCRIPTION OF OPERATIONS below							PER STATE OTH ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYER \$ E.L. DISEASE - POLICY LIMIT \$
B	Excess Liability			XSL-347450Y-00	7/31/2023	7/31/2024	2nd Layer
C	Excess Liability			EXC5125947	7/31/2023	7/31/2024	3rd Layer

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Additional insured status granted in favor of The Metropolitan Government of Nashville and Davidson County Metro Legal & Claims per form: CG 20 26 12 19.
 Extended Notice of Cancellation or Non-Renewal - 90-days - applies per form: 00 SGL0006 00 10 16

CERTIFICATE HOLDER The Metropolitan Government of Nashville and Davidson County Metro Legal & Claims c/o Insurance & Safety Division 222 3rd Avenue North, Ste #501 Nashville, TN 37201	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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ACORD 25 (2016/03)

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LICENSE AGREEMENT FOR PRIVATE ENCROACHMENTS
INTO THE PUBLIC RIGHT OF WAY

I/We, Powers Management, L.L.C., in consideration of the Resolution No. _____, to _____
construct, maintain, install and/or operate an encroachment into, onto, over, or under the public right
of way located at in Nashville, Davidson County, Tennessee, do hereby, for myself, my agents,
customers, and assigns, waive and release and hold harmless The Metropolitan Government of Nashville
and Davidson County, its agents, employees, and assigns from any and all claims, rights, or demands
for damages that may arise from my/our use, construction and/or maintenance of the
encroachment, to wit: (SEE ATTACHED DESCRIPTION OF ENCROACHMENT). I/We hereby
certify to the Metropolitan Government of Nashville and Davidson County that I/We have executed
a bond or liability insurance policy in such amount as agreed upon by the Director of NDOT and the
Metropolitan Attorney, and in the form approved by the Metropolitan Attorney (per Metropolitan Code
Section 38-1-1), which operates to indemnify and save The Metropolitan Government of Nashville and
Davidson County harmless from all claims or demands that may result to persons or property by
reason of the construction, operations or maintenance of the encroachment. I/We further agree that
my/our obligations hereunder may not be assigned except upon approval of the Director of NDOT
and the Metropolitan Attorney. I/We further acknowledge that any action that results in a failure to
maintain said bond or liability insurance for the protection of The Metropolitan Government of
Nashville and Davidson County shall operate to the granting of a lien to The Metropolitan Government
of Nashville and Davidson County in the amount of the last effective bond/insurance policy. Said
insurance or bond may not be cancelable or expirable except on 30 days' notice to the Director of
NDOT.

I/We further recognize that the license granted hereby is revocable by The Metropolitan Government
upon recommendation of the Director of NDOT and approval by resolution of the Metropolitan County
Council if it is determined to be necessary to the public welfare and convenience. In the event the
Metropolitan Government revokes this license as contemplated by this paragraph, licensee will not be
entitled to any compensation of any kind. This license shall also be strictly subject to the right of way
casement owned by The Metropolitan Government. I/We agree to maintain, construct and use the
encroachment in such a way as will not interfere with the rights and duties of the Metropolitan Government

as owner of the right of way. Said interference shall be additional grounds for revocation of the license for encroachment. I/We agree to pay the cost of construction, maintenance, use, as well as relocations cost of said encroachment. Licensee's failure to complete construction of the contemplated encroachment within 36 months of the date of approval by the Metropolitan Council will cause this license to terminate automatically. In the event the encroachment contemplated by this license is substantially destroyed, this license shall terminate unless fully restored by licensee within 36 months from the date of such destruction. In the event this license is revoked or terminated for any reason, licensee shall restore all public property to the condition obtaining at the time the license became effective at licensee's sole cost and expense.

DATE: January 4, 2024

Powers Management, L.L.C.

(Lessee of Property)

Michelle Kennedy

(Signature)

Michelle Kennedy

(Name)

President & Chief Operating Officer

(Title)

501 Broadway

Nashville, Tennessee 37203

(Address of Property)

STATE OF TENNESSEE)

COUNTY OF DAVIDSON)

Sworn to and subscribed before

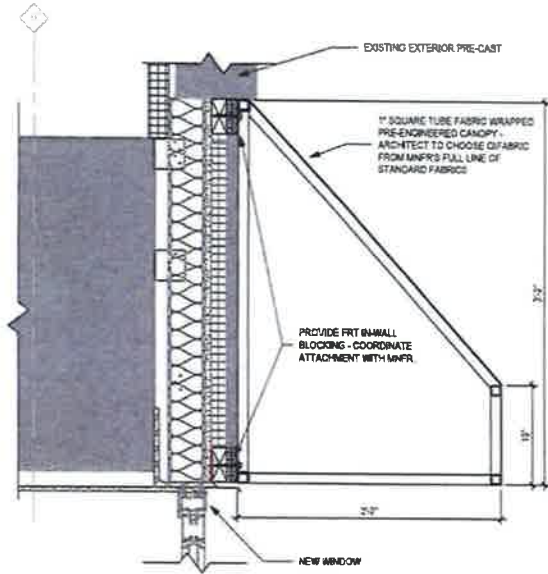
Me this 4th day of January, 2024.

Pier S. Vaughn

(NOTARY PUBLIC)

My Commission Expires: May 5, 2025.





2 ADD ALT 02 - SECTION DETAIL
 DD1.4 1/2" = 1'-0"

ADDITIONAL EXTERIOR SCOPE

01: AWNINGS ABOVE FOLDING WINDOWS

PROVIDE (2) NEW METAL FRAMED FABRIC WRAPPED AWNINGS ABOVE THE FOLDING WINDOWS. REFER TO SECTION DETAIL AND ELEVATION, THIS SHEET. EACH CANOPY TO BE APPROXIMATELY 24" LONG AND 22" DEEP. AWNING TO BE WRAPPED IN FIRE-RETARDANT BLACK FABRIC. FRONT FASCIA TO HAVE A CUSTOM LOGO / LETTERING THAT READS "MGM SPORTS LOUNGE".

02: PLANTER BOXES BELOW FOLDING WINDOWS

PROVIDE DECORATIVE FIBERGLASS WINDOW BOXES UNDER EACH WINDOW. EACH BOX TO BE ATTACHED TO WALL WITH BRACKETS (MAX SPACING 24"). PROVIDE FRT BLOCKING BEHIND METAL SIDING. REFER TO ELEVATIONS, THIS SHEET.

PLANTER B.O.D. MODERN WINDOW BOX, 72" X 8" X 8", BLACK
<https://www.horticulturalists.com/modern-black-window-box/>

BRACKET B.O.D. SHELF WINDOW BOX WALL BRACKET - BLACK POWDERCOAT
<https://www.2020industrial.com/shelf-window-box-bracket/>

03: NEW CANOPY ABOVE STREET ENTRANCE

PROVIDE PRE-ENGINEERED CANOPY ABOVE STREET ENTRY. 20' LONG X 3' DEEP. REFER TO ELEVATION, THIS SHEET. INCLUDE ADDITIONAL ALLOWANCE FOR STRUCTURAL DESIGN / ENGINEERING AND FACAGE REINFORCEMENT.

CANOPY B.O.D. MAPES SUPERLUMIDECK FLAT SOFTIT WITH 12" C CHANNEL FASCIA. BLACK.

04: UPLIGHTING AT BUILDING PILASTERS

PROVIDE UPLIGHTING AT (6) BUILDING PILASTERS AS INDICATED ON ELEVATION, THIS SHEET. ASSUME EXTERIOR / SURFACE MOUNTED CONDUIT.

LIGHT B.O.D. SEGAL 8x12 WALL MOUNTED CYLINDRICAL UP / DOWN LIGHT. BLACK FINISH

05: PLAQUE LIGHTING AT ENTRY DOORS

PROVIDE PLAQUE / MENU BOARD LIGHT AT EACH SIDE OF BUILDING BUILDING STREET ENTRY. SEE ELEVATION, THIS SHEET. ASSUME EXTERIOR / SURFACE MOUNTED CONDUIT.

LIGHT B.O.D. TARGETTI MRS SMITH WALL MOUNT LUMINAIRE, BLACK



1 EXTERIOR BUILDING ELEVATION
 DD1.4 1/8" = 1'-0"

ADDITIONAL EXTERIOR SCOPE

D1: AWNINGS ABOVE FOLDING WINDOWS

PROVIDE (3) NEW METAL FRAMED FABRIC WRAPPED AWNINGS ABOVE THE FOLDING WINDOWS. REFER TO SECTION DETAIL AND ELEVATION THIS SHEET. EACH CANOPY TO BE APPROXIMATELY 24' LONG AND 22" DEEP. AWNING TO BE WRAPPED IN FIRE-RETARDANT BLACK FABRIC. FRONT FASCIA TO HAVE A CUSTOM LOGO / LETTERING THAT READS 'BET MGM SPORTS LOUNGE'.



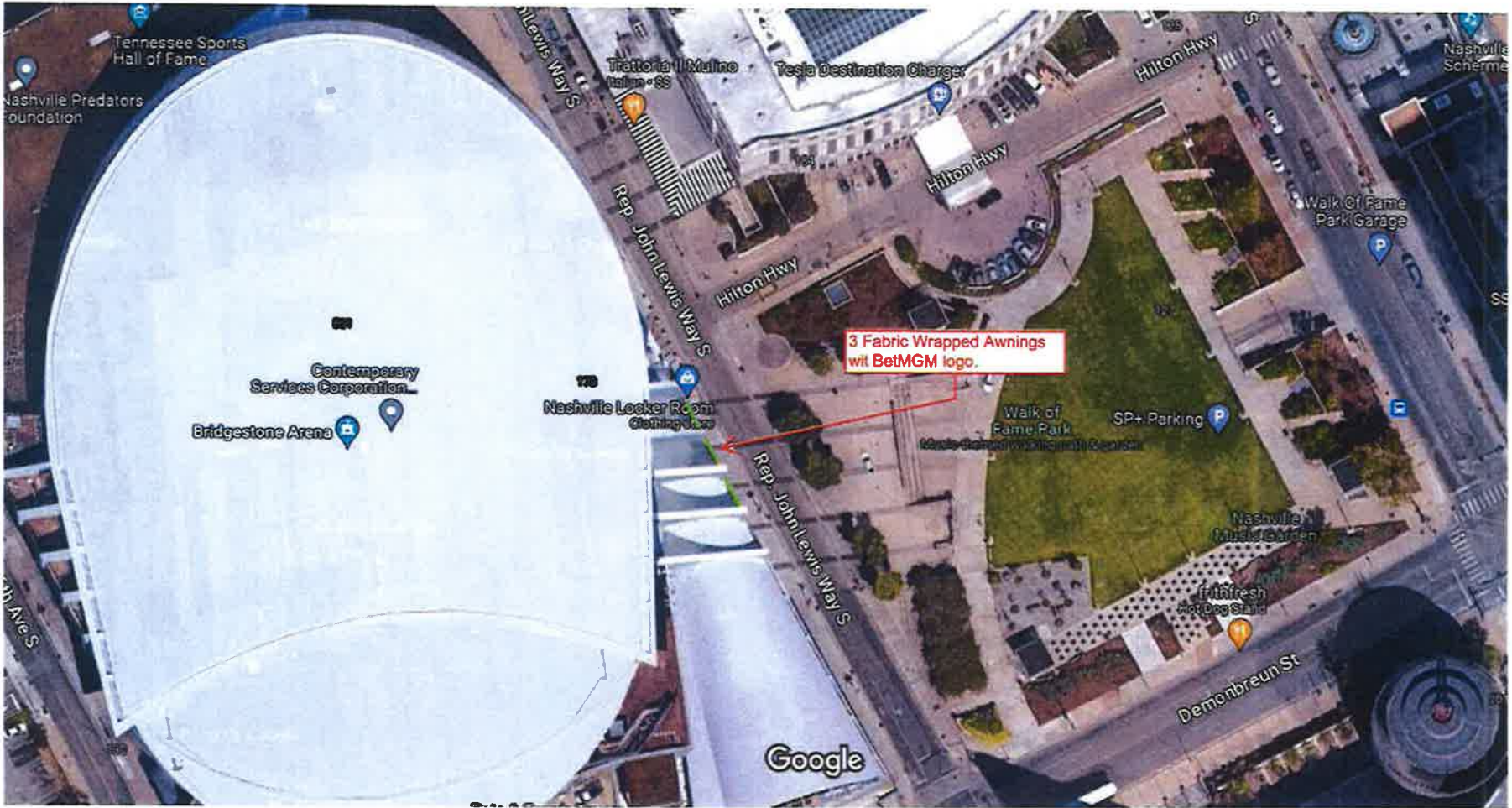
1
001A 1/8" = 1'-0"

EXTERIOR BUILDING ELEVATION

MSA SPORT

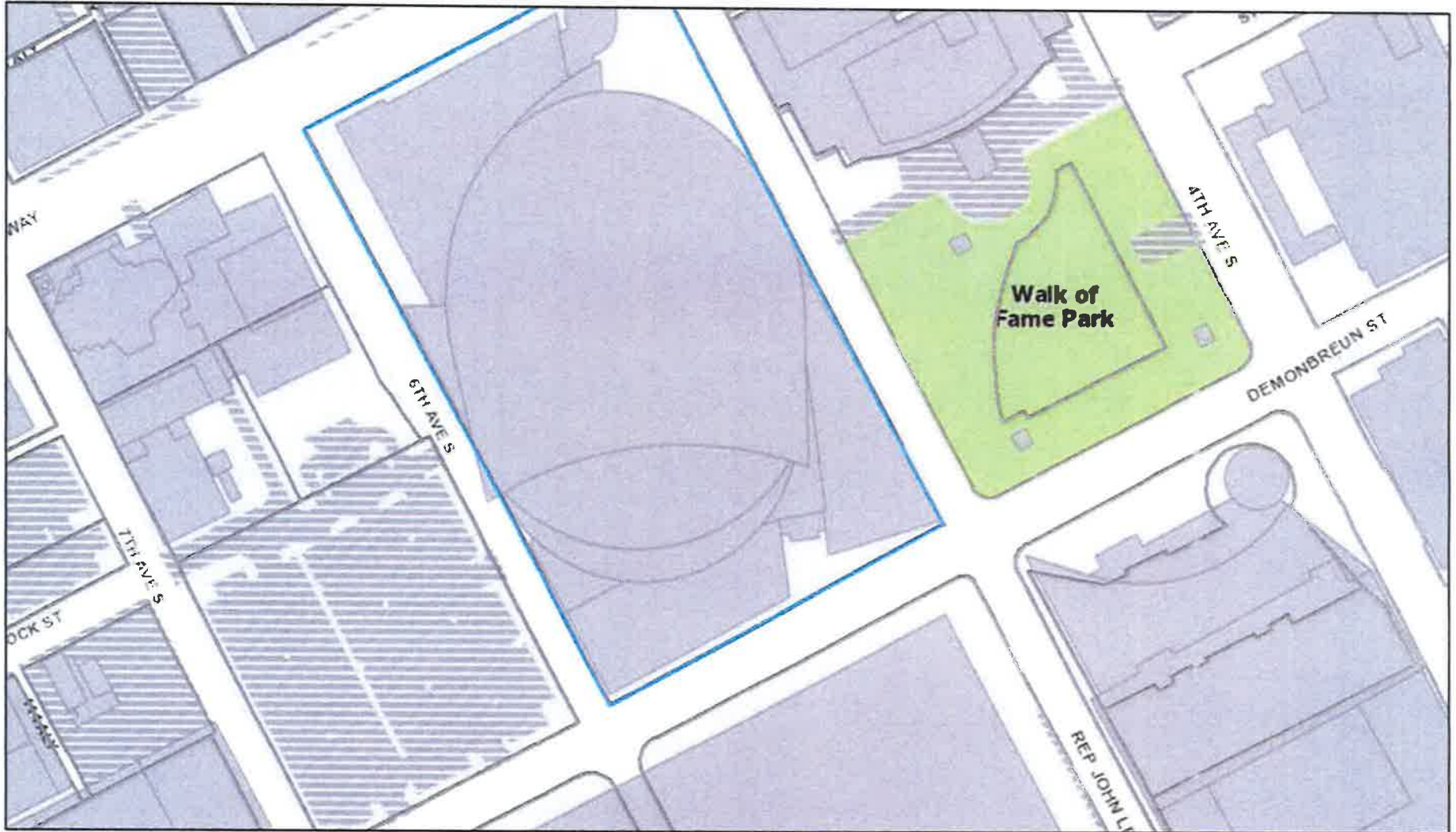
DRAFT

ADDITIONAL EXTERIOR SCOPE | BRIDGESTONE ARENA | LOWER SUITE LEVEL CLUB RENOVATION | 07/19/23
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Nashville / Davidson County Parcel Viewer



December 21, 2023

 graphicsLayer2

