Proposal No. 2022M-024EN-001

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDIC CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE FEBLUM. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTH 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 e. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A state this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). PRODUCER Chappell, Smith & Associates 1006 Merylinger Court PO Box 681209 Franklin, TN 37067	PROPERTY OF THE POLICIES INSURER(S), AUTHORIZED Provisions or be endorsed. dorsement. A statement on PAX (AC, Mo): PAX (AC, Mo): MBER: WE FOR THE POLICY PERIOD THE RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS LIMITS CE 5 1,000,00 TED 3 1,000,00 Exclude 5 1,000,00
CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE F BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTH REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy certain policies may require an endorsement. A state this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). PRODUCER FRODUCER FRODUCER TRADERIS, Smith & Associates 1006 Merylinger Court 20 Box 681299 Franklin, TN 37067 HISUBRED 411, LLC 411 Broadway Nashville, TN 37203 HISUBRED 411, LLC 411 Broadway Nashville, TN 37203 HISUBRED COVERAGES CERTIFICATE NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED ADOVE FOR THE POLICY CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. UNITY SHOWS AND POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. UNITY SHOWS AND POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. UNITY SHOWS AND POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. UNITY SHOWS MAY HAVE BEEN REDUCED BY PAID CLAMS. AND THE POLICY OF HISURANCE SHOWS THE OF HISURANCE ADD SHOW POLICIES. UNITY SHOWS MAY HAVE BEEN REDUCED BY PAID CLAMS. AND CONNECTION OF THE POLICIES OF THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. UNITY SHOWS MAY HAVE BEEN REDUCED BY PAID CLAMS. AND CONNECTION OF THE POLICIES OF THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. UNITY SHOWS MAY HAVE BEEN REDUCED BY PAID CLAMS. AND CONNECTION OF THE POLICIES OF THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE EXCLUSIONS OF THE POLICIES OF THE POLICIES DESCRIBED HEREIN IS SUBJECT	PROPERTY OF THE POLICIES INSURER(S), AUTHORIZED Provisions or be endorsed. dorsement. A statement on FAX (AVC, Mo): MBER: WE FOR THE POLICY PERIOD ITH RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS MEE \$ 1,000,00 TED 1,000,00 TED 1,000,00 TEXERNORY \$ 1,000,00 TEXERNORY \$ 1,000,00
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(set) must have ADDITIONAL INSURED provisions or be e If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A state this certificate does not confer rights to the certificate holder in lieu of such endorsements). PRODUCER Chapter Special S	MBER: WE FOR THE POLICY PERIOD ITH RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS LIMITS OC. 1,000,00 TED 0,1000,00 TED 1,000,00 TEXEBOOK 1 Exclude (MULRY 5 1,000,00
PRODUCER Chappell, smith & Associates 106 Merylinger Court 20 Box 891209 Fanklin, TN 37067 HISURER A: Westfield Insurance Co. 441, LLC 441 Broadway Nashville, TN 37203 HISURER B: HISUR	MBER: WE FOR THE POLICY PERIOD ITH RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS LIMITS LIMITS ACE \$ 1,000,00 TED \$ 1,000,00
COVERAGES THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LIBERD BELOW HAVE BEEN ISSUED TO THE INSURED AND CERTIFICATE MAY BEEN REQUIREMENT AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. A COMMERCIAL GENERAL LIABILITY AND CEMTER A LIBERD BY PAID CLAIMS. FAX (MC, Mc): [MAC, Mc, Mc): [MAC, Mc, Mc): [MAC, Mc, Mc): [MAC, Mc, Mc, Mc, Mc, Mc, Mc, Mc, Mc, Mc, Mc	MBER: WE FOR THE POLICY PERIOD ITH RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS LIMITS LIMITS ACE \$ 1,000,00 TED \$ 1,000,00
OVERAGES COVERAGES	MBER: WE FOR THE POLICY PERIOD ITH RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS LIMITS LIMITS ACE \$ 1,000,00 TED \$ 1,000,00
INSURER A: Westfield Insurance Co. 24 HISURER B: HISURER B: HISURER C: HIS	MBER: OVE FOR THE POLICY PERIOD THE RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS OCE \$ 1,000,00 TED 1,000,00 TED 1,000,00 TED 1,000,00 TED 1,000,00 TED 1,000,00 TED 1,000,00
INSURER 8: 411, LLC 411 Broadway Nashville, TN 37203 INSURER 6: INSURER 6: INSURER 6: INSURER 7: INSURER 8:	MBER: THE FOR THE POLICY PERIOD ITH RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS TO 1 1,000,00 TO 0 1 1,000,00
411, LLC 411 Broadway Nashville, TN 37203 INSURER 0: INSURE 0: INSURER 0: INSURE 0: INSURER 0: INSURE 0: INSURER 0: INSU	OVE FOR THE POLICY PERIOD THE RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS LIMITS LIMITS 1,000,00 1,000,00 LIMITS 1,000,00 1,000,00 1,000,00 1,000,00 1,000,00
A11 Broadway Nashville, TN 37203 INSURER 6: INSURER 6: INSURER 7: COVERAGES CERTIFICATE NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICIES INDICATED. NO THER TO COMMITTED THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICIES INDICATED. NO THERE DOCUMENT WITH RESPECT TO WE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. TYPE OF INSURANCE ADD. SUBR POLICY NUMBER POLICY BY	OVE FOR THE POLICY PERIOD THE RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS LIMITS ACE \$ 1,000,00 TED 1,000,00 AMBROOL \$ 1,000,00 AMBROOL \$ 1,000,00 AMBROOL \$ 1,000,00
Nashville, TN 37203 INSURER E: INSURER F: COVERAGES CERTIFICATE NUMBER: THIS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED ANAMED ABOVE FOR THE POLICIES INDICATED. NOTWITHSTANDING MY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. TYPE OF INSURANCE AND SUBR POLICY NUMBER POLICY BY POLICY	OVE FOR THE POLICY PERIOD THE RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS LIMITS LIMITS 1,000,00 1,000,00 LIMITS 1,000,00 1,000,00 1,000,00 1,000,00 1,000,00
COVERAGES CERTIFICATE NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE USTED BELOW HAVE BEEN ISSUED TO THE INSURED ANAMED ABOVE FOR THE POLICIES INDICATED. NOTWITHSTANDING ANY REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. TYPE OF INSURANCE AND SUBR POLICY HUMBER CLAIMS-MADE X OCCUR 220325G 3/29/2022 3/29/2023 3/29/20	OVE FOR THE POLICY PERIOD THE RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS LIMITS LIMITS 1,000,00 1,000,00 LIMITS 1,000,00 1,000,00 1,000,00 1,000,00 1,000,00
COVERAGES CERTIFICATE NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICIES INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LISTES SHOWN MAY HAVE BEEN REDUCED BY PAID CLAMS. TYPE OF INSURANCE AND SUBR POLICY HUMBER POLICY PROPERTY. CLAMS-MACE X OCCUR 220325G 3/29/2022 3/29/2022 3/29/2023 3/29/2023 3/29/2023 3/29/2023 3/29/2023 3/29/2023 3/29/2023 AND SET PRODUCTS - COMPION AGE S COMMENCED SHOW DESCRIBED S ANY AUTO OWNED ANY AUTO OWNED ANY AUTO OWNED AUTOS COMMENCED SCHEDULED AUTOS ONLY AUTOS BOOLY INJURY OF PRICE PRINT COMMENCED SCHEDULED AUTOS ONLY AUTOS BOOLY INJURY OF PRINCIPLINIT (B) sociolinit (B) sociolinit (C) BOOLY INJURY OF PRINCIPLINIT (B) sociolinit S BOOLY INJURY OF PRINCIPLINIT (C) BOOLY I	OVE FOR THE POLICY PERIOD THE RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS LIMITS LIMITS 1,000,00 1100,000 LIMITS 1,000,00 LIMITS 1,000,00 LIMITS 1,000,00 LIMITS 1,000,00 1,000,00
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICIES INDICATED. NO OTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WITH CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAMS, TYPE OF INSURANCE AND SURR POLICY HUMBER POLICY EXP. AX COMMERCIAL GENERAL LIABILITY CLAMS-MACE X OCCUR 220325G 3/29/2022 3/29/2023	OVE FOR THE POLICY PERIOD THE RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS. LIMITS LIMITS LIMITS 1,000,00 1100,000 LIMITS 1,000,00 LIMITS 1,000,00 LIMITS 1,000,00 LIMITS 1,000,00 1,000,00
TIPE OF INSURANCE ADD. SURR POLICY NUMBER IMMIDITYTY) LIMITS A X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR 220325G 3/29/2022 3/29/2023 3/29/2023 3/29/2023 3/29/2023 3/29/2023 3/29/2023 3/29/2023 AND. SURR POLICY NUMBER EACH OCCURRENCE S DAMAGE TO RESTED POLICY SURPLINES SEED EQUIPMENT S PRODUCT OCCURRENCE S DAMAGE TO RESTED SURPLINES SEED EQUIPMENT S PRODUCTS. AND EACH OCCURRENCE S PRODUCTS. OCCURRENCE S SAUTOMOBILE LIABILITY ANY AUTO OWNED ANY AUTO SCHEDULED SCHEDUL	oce \$ 1,000,00 TED \$ 1,000,00 presero \$ Exclude (NULRY \$ 1,000,00
A X COMMERCIAL GENERAL LIABILITY CLAMS-MADE X OCCUR 220325G 3/29/2022 3/29/2022 3/29/2023 3/29/2023 3/29/2023 3/29/2023 3/29/2023 3/29/2023 3/29/2023 3/29/2023 AND COLUMN	oce \$ 1,000,00 TED \$ 1,000,00 presero \$ Exclude (NULRY \$ 1,000,00
CLAMS-MADE X OCCUR 220325G 3/29/2022 3/29/2023 DAMACE TO RESTED OF SENTED PREMISES (Ex occurrence) DAMACE TO RESTED PREMISES (Ex occurrence) GENERAL ADDIVIDURY S OTHER AUTOMOBILE LIABLITY ANY AUTO OWNED OWNED OWNED OWNED AUTOS BOOLY INJUTY (Per perion) BOOLY INJUTY (Perion) BOOLY INJUTY (Per perion)	TED 5 1,000,00 pure-ce) 5 Exclude 7/NURY 5 1,000,00
MED EXP (Any one person) 3 PERSONAL & ADVINUERY 5 GENERAL AGGREGATE 5 POLICY PER LOC PRODUCTS - COMPION AGG 5 OTHER AUTOMOBILE LIMIT TO COMPION OF THE COMP	1,000,00 1 Exclude 1,000,00
GENT, AGGREGATE LIMIT APPLIES POR: POLICY PEC LOC PRODUCTS LOC PRODUCTS PRODUCTS - COMPROP AGG S AUTOMOBILE LIMBLITY ANY AUTO COMMENCE SCHOOLED AUTOS ONLY AUTOS AUTOS BOOKLY MAJRY (Per person 5 BOOKLY MAJRY (PERSON 5 BOOKLY MAJRY (PE	(NULRY 5 1,000,00
GENERAL AGGREGATE LIMIT APPLIES PER: POLICY PRO LOC OTHER AUTOMORILE LIABILITY ANY AUTO OWNED AUTOS ONLY AUTOS SCHEDULED AUTOS ONLY	District a
POUCY PRODUCTS - COMPIOP AGG S OTHERS AUTOMOBILE LIABILITY ANY AUTO OWNED OWNED AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS BOOLY IN JURY (Per person) 3 BOOLY IN JURY (Per person) 5	Z.000.00
OTHER COMMENCE LEARLY S	2 000 00
AUTOMOBILE LIABILITY ANY AUTO OWNED OWNED AUTOS ONLY AUTOS BOOLY INJURY (Per person) 3 BOOLY INJURY (Per person) 3 BOOLY INJURY (Per person) 5 BOOLY INJURY (Per person) 5	PIOP AGG S
ANY AUTO OWNED SCHEDULED BOOLY INJURY (Per person) 5 AUTOS ONLY AUTOS BOOLY INJURY (Per person) 5	FLIMIT
OWNED SCHEDULED AUTOS ONLY AUTOS BOOKLY INJURY (No socioles) 5	,
ADTOS ONLY ADTOS ONLY (Per scoderd) 5	
	5
A X IMPRESALIAB X COLD	s 10,000,00
2903360 32003093 32003093	10,000,00
AQQREGATE 5	5 10,000,00
DED AS DESIGNAD	OTH-
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N STATUTE ER	ER
ANY PROPRIET DISPARATINE RESECUTIVE OFFICE STATE OF THE DESCRIPTION OF THE STATE O	INT 9
(Managelety in 1410) EL DESCARE - BA EMPLOYEE S If yes, describe under	
DESCRIPTION OF OPERATIONS select E.L. DISEASE - POLICY LIMIT \$	
ESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACCRD 101, Aprillonal Remarks Schoolale, may be attached if more space to required)	EMPLOYEE 8

{N0509137.1}

LICENSE AGREEMENT FOR PRIVATE ENCROACHMENTS INTO THE PUBLIC RIGHT OF WAY

I/We, 411, LLC , 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 Public Works 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 Public Works 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 Public Works.
I/We further recognize that the license granted hereby is revocable by The Metropolitan Government upon
recommendation of the Director of Public Works 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
easement 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: 10/7/22

(Owner of Property)

411 Broadway

(Address of Property)

Nashville, TN

(City and State)

STATE OF TENNESSEE)

COUNTY OF DAVIDSON)

Sworn to and subscribed before

Me this 11th day of October, 2023

(NOTARY PUBLIC)

My Comunission Expires: 12.17.24

STATE OF TENNESSEE NOTARY PUBLIC PUBLIC STATE CONTINUES OF TENNESSEE NOTARY PUBLIC STATE OF THE PUBLIC STA