## Proposal No. 2022M-031EN-001

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE A BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUE REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.         IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSUR If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an this certificate does not confer rights to the certificate holder in fleu of such endorsemont(s).         PRODUCER Martin & Zerfoss, Inc. 6730 Charlotte Pike Martin & Zerfoss, Inc. 6730 Charlotte Pike Martin & Zerfoss, Inc. 6730 Charlotte Pike Martin & Jantes C. Nushville TN 37209       MCECDOW-SP MARKER 5: Berk/ay Specialty insurance Com Nushvelle TN 37209         MCBCDOW-SP Mashville TN 37209       MCECDOW-SP MARKER 6: Insurance Com Nushvelle TN 37209       MCECDOW-SP MARKER 0: Insurance Com Nushvelle TN 37209         MCBCDOW-SP MARKER D: Insurance Com Nushvelle TN 37209       MCECDOW-SP MARKER 0: Insurance Com Nushvelle TN 37209       MCECDOW-SP MARKER 0: Insurance Com Nushvelle TN 37209         MCBCDOW-SP MARKER D: Insurance Com Nushvelle TN 37209       MCECDOW-SP MARKER 0: Insurance Com Nushvelle TN 37209       MCECDOW-SP MARKER 0: Insurance Com Nushvelle TN 37209         MCBCDOW-SP MARKER D: Insurance Com Nushvelle TN 37209       MCECDOW-SP MARKER 0: Insurance Com Nushvelle TN 37209       MCECDOW-SP MARKER 0: Insurance Com Nushvelle TN 37209         MCBCDOW-SP MARKER D: Insurance Com NuckATED NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT CERTIFICA	CERTIFICATE HOLD FFORDED BY THE G INSURER(S), AUT ED provisions or be- endorsement. A star PAX PAX NUMBER: BOVE FOR THE POLIC WITH RESPECT TO VIL I SUBJECT TO ALL TO UMITS	POLICIE FHORIZE endorse lement ( -7/35KI kal0 / kal0 / http://www.second.com/
If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an this continued does not conter rights to the certificate holder in lieu of such endorsement(s).         Marcin & Zerfoss, Inc.       CONTACK Paul Steele         Martin & Zerfoss, Inc.       CONTACK Paul Steele         6730 Chartofile Pike       Note Chartofile Pike         Naishvilke TN 37209       McRopoweat         MStrine       McRopoweat         MCBCD Cownitows, LLC       McRopoweat         Nashville TN 37209       McRopoweat         MCBCD Cownitows, LLC       McRopoweat         Nashville TN 37209       McRopoweat         McRopoweat       Newfer 0:         Insurance :       Insurance :         Nashville TN 37209       Insurance :         COVERAGES       CERTIFICATE NUMBER: 1168455985         THIS IS TO CERTERY THAT THE POLICIES OF INSURANCE AFFORDED BELOW HAV DOWNING CONCONTRO OR OTHER DOCUMENT         CENTIFICATE MUMBER: LISTED BELOW HAVE BEEN ISSUED TO THE INSURANCE OR ODWITION OF ANY CONCENT OR OTHER DOCUMENT         CENTIFICATE MUMBER: LISTED BELOW HAVE BEEN REDUCED BY PALCLES DESCHIBED HEREN IS	NUMBER: DOVE FOR THE POLIC INSUMPTION FOR THE POLIC INSUMPTION FOR THE POLIC WITH RESPECT TO VIL I SUBJECT TO ALL TO UMITS	tement ( -7350 NAIGE NAIGE
RODUCER Martin & Zerfoss, Inc. S730 Chartofte Pike Vashville TN 37209 Isuman MCBCDW-BY Isuman MCBCDW-BY Martin & Zerfoss, Inc. S730 Chartofte Pike Vashville TN 37209 Isuman MCBCDW-BY MC	NOE parky NUMBER: DOVE FOR THE POAK WITH RESPECT TO W I SUBJECT TO ALL P UMITS	NAIG MAIG TY <b>FERIC</b> HICH TH
Martin & Zenross, Inc. ST30 Chartoffe Pike Nashvilke TN 37209 Meteodow-at Meteo	NOE parky NUMBER: DOVE FOR THE POAK WITH RESPECT TO W I SUBJECT TO ALL P UMITS	NAIG MAIG TY <b>FERIC</b> HICH TH
ANALY IN THE FOLLOW     ANALY IN THE FOLLOW     ANALY IN THE POLICIES OF INSURANCE CONTRACTOR OF THE INSURE F.     ANALY IN THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURE F.     ANALY IN THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURE F.     ANALY IN THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURE F.     ANALY IN THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURE F.     ANALY IN THE INSURANCE AFFORDED BY THE POLICIES DESCHIBED HERE N.     EXCLUSIONS AND CONDITIONS OF SUCI POLICIES. LIMITS SHOWN MAY LAVE BEEN REDUCED BY PAID CLAIMS.     ANALY IN THE INSURANCE AFFORDED BY THE POLICIES DESCHIBED HERE N.     EXCLUSIONS AND CONDITIONS OF SUCI POLICIES. LIMITS SHOWN MAY LAVE BEEN REDUCED BY PAID CLAIMS.     ANALY IN THE INSURANCE AFFORDED BY THE POLICIES DESCHIBED HERE N.     EXCLUSIONS AND CONDITIONS OF SUCI POLICIES. LIMITS SHOWN MAY LAVE BEEN REDUCED BY PAID CLAIMS.     ANALY IN THE OF SUCH POLICIES. LIMITS SHOWN MAY LAVE BEEN REDUCED BY PAID CLAIMS.     ANALY IN THE OF SUCH POLICIES. LIMITS SHOWN MAY LAVE BEEN REDUCED BY PAID CLAIMS.     ANALY IN THE OF SUCH POLICIES. LIMITS SHOWN MAY LAVE BEEN REDUCED BY PAID CLAIMS.     ANALY IN THE OF SUCH POLICIES. LIMITS SHOWN MAY LAVE BEEN REDUCED BY PAID CLAIMS.     ANALY IN THE OF SUCH POLICIES. LIMITS SHOWN MAY LAVE BEEN REDUCED BY PAID CLAIMS.     ANALY INTERVENTION OF ANY CLAIMS.     ANALY INTERVENT.      ANALY INTERVENT.	NOE parky NUMBER: DOVE FOR THE POAK WITH RESPECT TO W I SUBJECT TO ALL P UMITS	NAIG MAIG TY <b>FERIC</b> HICH TH
INSURER IN THIS FLOT BEGO INSURER INSURE IN	NUMBER: DOVE FOR THE POLIC WITH RESPECT TO W I SUBJECT TO ALL TO UMITS	CY PERIC HICH TH
SURED MEEGDOW-3, LLC CORDICATE NUMBER A: Berk/ay Specialty insurance Correspondence of the summer of	NUMBER: DOVE FOR THE POLIC WITH RESPECT TO W I SUBJECT TO ALL TO UMITS	CY PERIC HICH TH
SURED     MERCOOK-01       ICEDC Drawniowa, LLC       CO 44ch Ave N       Insurance	NUMBER: BOVE FOR THE POAK WITH RESPECT TO WI SUBJECT TO ALL TO UNITS	HICH TH
CEBC Downlows, LLC     INSURER 0:       C0 44th Ave N     Insurer 0:       ashville TN 37209     Insurer 0:       OVERAGES     CERTIFICATE NUMBER: 1188455985       OVERAGES     CERTIFICATE NUMBER: 1188455985       OVERAGES     CERTIFICATE NUMBER: 1188455985       CERTIFICATE NUMBER: 1188475985     REVISION       THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED A INSURER 0:       INSURER 0:     Insurer 1:       CERTIFICATE NUMBER: 1188455985     REVISION       CERTIFICATE MAY BE ISSUED OF INSURANCE LISED BELOW HAVE BEEN ISSUED TO THE INSURATION OF ANY CONTRACT OR OTHER DOCUMENT TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT EXCLUSIONS AND CONTRACTOR OTHER DOCUMENT ISSUED OF INSURANCE AFFORDED BY THE POLICIES DESCHIED HERE'N IS       VECUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.       A     TYPE OF INSURANCE       Y     COLOR POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.       X     COMMERCIAL GENERAL LIABLITY       CALUST MANDE     COLOR NUMBER       X     ODPD Dension       X     ODPD Dension	NOVE FOR THE POLIC WITH RESPECT TO W I SUBJECT TO ALL TO UMITS	HICH TH
CO 44th Ave N     INSURER C :       ashville TN 37209     INSURER C :       INSURER C :     INSURER C :       INSURE	NOVE FOR THE POLIC WITH RESPECT TO W I SUBJECT TO ALL TO UMITS	HICH TH
	NOVE FOR THE POLIC WITH RESPECT TO W I SUBJECT TO ALL TO UMITS	HICH TH
Insumeries         Insumeries           OVERAGES         CERTIFICATE NUMBER: 1168455985         REVISION           THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED A INDOCATED. NOTWITHSTANDING ANY REQUERENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT CERTIFICATE MAY BE ISSUED OF MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCHIBED HERE IN IS EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.           4         TYPE OF INSURANCE INSURANCE         POLICY NUMBER         POLICY FF POLICY FF POLI	NOVE FOR THE POLIC WITH RESPECT TO W I SUBJECT TO ALL TO UMITS	HICH TH
OVERAGES         CERTIFICATE NUMBER: 1168455985         REVISION           THIS IS TO DERTEY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED A INDICATED NOTWITHSTANDING ANY PECURE/REMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT CERTIFICATE MAY BE ISSUED OF MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HERE N IS EXCLUSIONS AND CONDITIONS OF SUCI POLICIES, LINTS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.           R         TYPE OF INSURANCE AND MARK ALLEBALITY         POLICY NUMBER INSURANCE CAUSA MARK X DOCLIR         SCR.0173510         RH5/2022         MUX/2023 MUX/2023         SCR.00000 PHILDOCTOF PHILDOCTOF           X         03PD Der-\$2005         DOCLIR         COLOR TO DER DOCLIRS         MART EXP (Ar PERSONAL A	NOVE FOR THE POLIC WITH RESPECT TO W I SUBJECT TO ALL TO UMITS	HICH TH
THIS IS TO CERTERY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURPLI NAMED A INDRAFTED NOTWITHSTANDING ANY REQUERIENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT CERTERICATE MAY BETANDING ANY PROJECTES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.       IN COMMERCIAL GENERAL LIABLITY     ADDR SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.       X     COMMERCIAL GENERAL LIABLITY       X     OMPD CHASTOR       X     OMPD CHASTOR       X     OMPD CHASTOR	NOVE FOR THE POLIC WITH RESPECT TO W I SUBJECT TO ALL TO UMITS	HICH TH
INDRATED NOTWITHSTANDING ANY REQUERDENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT CERTIFICATE MAY BE ISSUED OF MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HERE N & COLUDIONS AND CONDITIONS OF SUCI POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. TYPE OF INSURANCE AND CAUGE AND AND CAUGE AND AND CAUGE AFFORDED BY THE POLICY OF A COMMERCIAL GENERAL LIABLITY COLOUR AND AND CAUGE AFFORDED BY THE POLICY OF CONTRACT AND CAUGE AND CAUGE AND AND CAUGE AND AND CAUGE AFFORDED BY AND CLAIMS. TYPE OF INSURANCE ADDR. CONTRACT AND CAUGE AND CAUGE AND CAUGE AND CAUGE AFFORDED BY THE POLICY OF AND CLAIMS. TYPE OF INSURANCE ADDR.	WITH RESPECT TO W I SUBJECT TO ALL TO UMITS	HICH TH
X         COMMERCIAL GENERAL LIABLITY         COLO173310         8/15/2022         3/1/2023         EACH OCCUR           X         03/PD CHAR4005         X         DSCUR         MRS EXP (Arrendom)         MRS EXP (Arrendom)	1000 Contract 1000	
CONTROL AND A DOCTOR AND A DOCT		
L CLAINES ADAS A L DECLIR X (33PD Generations PERSonal A	RENTED	
PERSONAL A	alternation \$100.000	
CENTER ADDRESS AND ADDRESS ADDRE	and a state of the	
1 page.	analysis and a second	
19000 The case and an and a second se	COMPOPAGE \$ EXCLU	CE0
1C1+ER Destantia	\$1.000	
AUTOMOBILE LWBILTY	NIGLELIART J	
	RY (Per parent)	
	W (Per acceders) \$	
HERE NUMPER PROPERTY D	AMADE 1	
	3	
VWBRELLALIAS X (2001) CX 0173414 \$15/2022 3/1/2023 FACHOROM	danie s 2.000,0	acto
X EXCESSION CLARISMADE ACORECATE	12,000.0	
tatu ketanbuli	1,000,0	
VORKERS COMPENSATION PER		
YIN YIN	State of the second	
DIFICEMARADEREXCLUDED? N/A		
P. Sec. Breathing sector	-EA CMPLOYER 7	
DESCRIPTION OF OPERATIONS AND EL DERAIS	FOLCY (BHT )	
CRIPTICAL OF OPERATIONS / LICATIONS / UTACTLES IA CONTACTS, Additional Remarks Schedule marks in attribut Basing Supers in any locational		_
scentrice) of openations / Locations / velocuss (acore) tos, Additional Remarks Schedule, way be attached it more spece is required) In Molifografian Boyernment of Nashville & Davidson County, Molto Lagat and datms ofo Insurance and Safety Division is m quired by contract. A 30 Day notice of cancellation appliae.	cluded as additional in	istiroida

ACORD 25 (2016/03)

The ACORD name and logo are registered marks of ACORD



November 4<sup>th</sup>, 2022

Director of Engineering Department of Public Works 720 S. Fifth St. Nashville, TN 37206

Director,

A customer of ours, Teddy's Tavern, located at 104 5<sup>th</sup> Avenue South, is requesting an aerial encroachment for one (1) proposed double-faced, illuminated projecting sign over the public sidewalk of 5<sup>th</sup> Avenue South.

A rendering of the sign is on the last page of this packet. Attached please find all of the forms and information required by the Department of Public Works for your review.

If you have any questions, I can be reached at the office 615-255-3463 or by email at ashton@joslinsign.com.

Thank you,

Ashton Barrett Municipal Liaison Joslin and Son Signs 630 Murfreesboro Pike Nashville, TN 37210 O: 615-255-3463 Metropolitan Government Department of Public Works 750 South 5" Street v Nashville, TN 37208 v (618) 802-8750 v www.nashville.gov/public-works

#### Mandatory Referral Application: Encroachment: Sign / Awning / Fiber Optic Cable / Other \*\*\* Before filing this application, please review checklist on the back of this application. \*\*\* Encroachment Type: Date Submitted: \* Awning π Fiber Optic Cable (↑ ground) Mandatory Referral Project No. Fiber Optic Cable ( ground) (MPW statt assigns project #) # Sign> Other, R 0930123 Map & Parcel(s): \_ Street Address(es): 104 5th NUSAVIILE 37 h/4 Notarized Signature of Property Owner(s): You must obtain the notarized algorature of all propeny owners on whose property the sign or awning will occur. Failure to provide this information will deem your application incomplate and postpone your application's consideration by the Metropolitan Planning Commission. Copy form below for additional signatures. As the owner(s) of property, live agree to the automission of this mendatory refurral application to the Metropolitan Governe Department of Public Works for a sign, awning or ther optic cable encroachment. Company Hea Company Hea STATE OF TENNESSEF NOTAP PUP 104 5th Ave S Invertors LLC 5 7203 3 ッれ uss of Prepa MCO 2024 // fototall Applicant: All correspondence will be mailed to the applicant. SIGN CONTRACTOR ther: π Architect π Engineer π Proparty Owner Neme 5 1521 +Filing Fee (All application fees are non-refundable)

Business: J 10000000 Pale 62 Encroechment: Sign / Awning / Fiber Optic Gebie \$250.00 Other Jasi City: Amount paid: . Cel 5-25 Phone: Accepted by: Date Debusiness () home D bueldans D Fax C business C home O business D mobile E-mall: MIKE SHEA CJOSLINFIEN. CON

Applicant's Signature:

#### PETITION TO ENCROACH UPON A PUBLIC RIGHT-OF-WAY

PETITION NO.

We, the undersigned, do hereby petition the METROPOLITAN DEPARTMENT OF PUBLIC WORKS and the METROPOLITAN PLANNING COMMISSION to recommend to the METROPOLITAN COUNCIL and MAYOR that legislation be enacted to authorize the construction, installation and maintenance of an encroachment upon the public right-of-way as follows:

double sided illuminated 

Addresses and Map and Parcel numbers of property or properties associated with the proposed encroachment:

ADDRESS

MAP AND PARCEL NUMBER

104 5th Ave. S. 09306311200 Nashville, TN 37203

Attach the following in support or explanation of this application:

A check for the filing fee of \$250.00 made payable to the Metropolitan Government (application fee is non-refundable).

 $\underline{X}$  A scaled drawing on 8 1/2 "x 14" paper of the proposed encroachment. (Additional exhibits may be required depending upon the nature of the request).

A private encroachment license agreement signed by the person to whom the encroachment privilege is to be granted.

 $\underline{X}$  A certificate of liability insurance in the amount to be determined necessary by the Department of Public Works.

Signature and mailing address of person or business to whom privilege of encroachment will be granted:

Address: 430 Mutfreesporo Signature: Namighe 3740 IN

Council District: 19

PERSON FILING THIS PETITION:

If other than owner or optionee of properties listed above, state relationship. All correspondence will be mailed to this person.

Name: Mike Shea, JOSIM + Son Signs Address: U30 MULTIPERSBORD PK	
City, State, Zip: Nashville, TN 37210	
Phone: Residence	

Business 1015-255-3443

## NOTE: THIS APPLICATION WILL NOT BE ACCEPTED UNLESS COMPLETED IN FULL.

#### CERTIFICATE OF INSURANCE

This is to further certify to the Metropolitan Government of Nashville and Davidson County concerning the policies of insurance listed above and the coverage provided thereby that:

- 1. The Contractual Insurance coverage is on a Blanket Broad Form basis unless specifically indicated below,
- The company or companies, upon request, agree to deliver within fifteen (15) days a certified copy of any and/or all of the policies of insurance to The Metropolitan Government of Nashville and Davidson County,
- If one (1) or more Umbrella Excess policies are used, there is no gap between the limits of the primary policies and the deductible feature of the Umbrella Excess policies,
- 4. Coverage under the primary policies have no deductible features unless there is a check mark here (x). If there are deductible features or the insured has adopted a funded self-insurance program, they are fully explained on an attached sheet which becomes a part of this Certificate, and
- 5. The coverage provided shall not be cancelled, reduced in coverage, or allowed to lapse <u>unless and until</u> The Metropolitan Government of Nashville and Davidson County receives at least thirty (30) days advance written notice of same. The written notice <u>must</u> be delivered to the Metropolitan Risk Manager at his office shown as the address of the Certificate Holder below or the secondary Certificate Holder, if one is so listed below.

## Name and Address of Certificate Holder

The Metropolitan Government of Nashville and Davidson County Metro Legal & Claims C/O Insurance and Safety Division 222 3<sup>rd</sup> Avenue North, Ste #501 Nashville, TN 37201

Date Issued: l ency or ompar nizo R escatative) (Attach Power of Attorney)

.

# LICENSE AGREEMENT FOR PRIVATE ENCROACHMENTS INTO THE PUBLIC RIGHT OF WAY

UWe, 104 5th Ave S Invertals IIC, 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: 10-31-22

104 SA Ave S. Investors LLC by (Owner of Property) Robel love 104 Rep John Lewis Way S. Prisidat (Address of Property) Neshville, TN (City and State)

STATE OF TENNESSEE)

COUNTY OF DAVIDSON)

Sworn to and subscribed before

Me this 31 day of October, 20 5 2024 My Commission Expires:





# **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 11/3/2022

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.				POLICIES			
IMPORTANT: If the certificate holder is an A If SUBROGATION IS WAIVED, subject to the this certificate does not confer rights to the c	terms and conditions of th	e policy, certain p	olicies may				
PRODUCER	ertificate fiolder in neu of st	CONTACT NAME: Paul Steele					
Martin & Zerfoss, Inc.							
6730 Charlotte Pike Nashville TN 37209	PHONE FAX (A/C, No, Ext): 615-297-8500 (A/C, No): 615-269-7390 E-MAIL ADDRESS: psteele@martinzerfoss.com				5-7330		
Nashville TN 57209						NAIC #	
				ER(S) AFFORDING COVERAGE NAIC # ecialty Insurance Company			
INSURED	MCBCDOW-01		Specially Ins	surance Company			
MCBC Downtown, LLC		INSURER B :					
800 44th Ave N		INSURER C :			-		
Nashville TN 37209		INSURER D :					
		INSURER E :					
COVERAGES CERTIFICA	TE NUMBER: 1168455985	INSURER F :		REVISION NUMBER:			
THIS IS TO CERTIFY THAT THE POLICIES OF INS		E BEEN ISSUED TO					
INDICATED. NOTWITHSTANDING ANY REQUIRED CERTIFICATE MAY BE ISSUED OR MAY PERTAIL EXCLUSIONS AND CONDITIONS OF SUCH POLICIE	MENT, TERM OR CONDITION N, THE INSURANCE AFFORD	of any contract Ed by the policie	OR OTHER	DOCUMENT WITH RESPEC D HEREIN IS SUBJECT TO	ст то и	VHICH THIS	
INSR ADDL SU	JBR		POLICY EXP (MM/DD/YYYY)		•		
LTR TYPE OF INSURANCE INSD W A X COMMERCIAL GENERAL LIABILITY Y	CGL0173310	8/15/2022	(MM/DD/YYYY) 3/1/2023			000	
		0/10/2022	3/1/2023	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000		
					\$ 100,0		
A BI/PD Ded-\$1000				MED EXP (Any one person)	\$ EXCL		
				PERSONAL & ADV INJURY	\$ 1,000		
GEN'L AGGREGATE LIMIT APPLIES PER:		20 <b>6</b> 5		GENERAL AGGREGATE	\$ 2,000		
POLICY PRO- JECT LOC				PRODUCTS - COMP/OP AGG	\$ EXCL \$ 1,000		
OTHER:				Deductible COMBINED SINGLE LIMIT	\$ 1,000		
			1	(Ea accident)			
ANY AUTO OWNED SCHEDULED				BODILY INJURY (Per person)	\$		
AUTOS ONLY AUTOS HIRED NON-OWNED				BODILY INJURY (Per accident) PROPERTY DAMAGE	\$		
AUTOS ONLY AUTOS ONLY				(Per accident)	\$		
					\$		
A UMBRELLA LIAB X OCCUR	CX 0173414	8/15/2022	3/1/2023	EACH OCCURRENCE	\$ 2,000		
X EXCESS LIAB CLAIMS-MADE				AGGREGATE	\$ 2,000	,000	
DED RETENTION \$				PER OTH-	\$		
AND EMPLOYERS' LIABILITY Y / N				PER OTH- STATUTE ER			
ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBEREXCLUDED?		2.52		E.L. EACH ACCIDENT	\$		
(Mandatory in NH)				E.L. DISEASE - EA EMPLOYEE	\$		
If yes, describe under DESCRIPTION OF OPERATIONS below				E.L. DISEASE - POLICY LIMIT	\$		
			l				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACC The Metropolitan Government of Nashville & David required by contract. A 30 Day notice of cancellati	ison County, Metro Legal and				ditional	insureds as	
CERTIFICATE HOLDER		CANCELLATION					
The Metropolitan Government of County - Metro Legal & Claims c/o Insurance & Safety Division	Nashville & Davidson	THE EXPIRATIO ACCORDANCE W	N DATE TH	ESCRIBED POLICIES BE C, EREOF, NOTICE WILL E Y PROVISIONS.			
223 3rd Avenue North, Ste #501		AUTHORIZED REPRESE					
Nashville TN 37201		Pal 5					
		© 1	988-2015 AC	ORD CORPORATION.	All riah	ts reserved.	

The ACORD name and logo are registered marks of ACORD





END VIEW

NOT TO SCALE

SIDE VIEW

105958

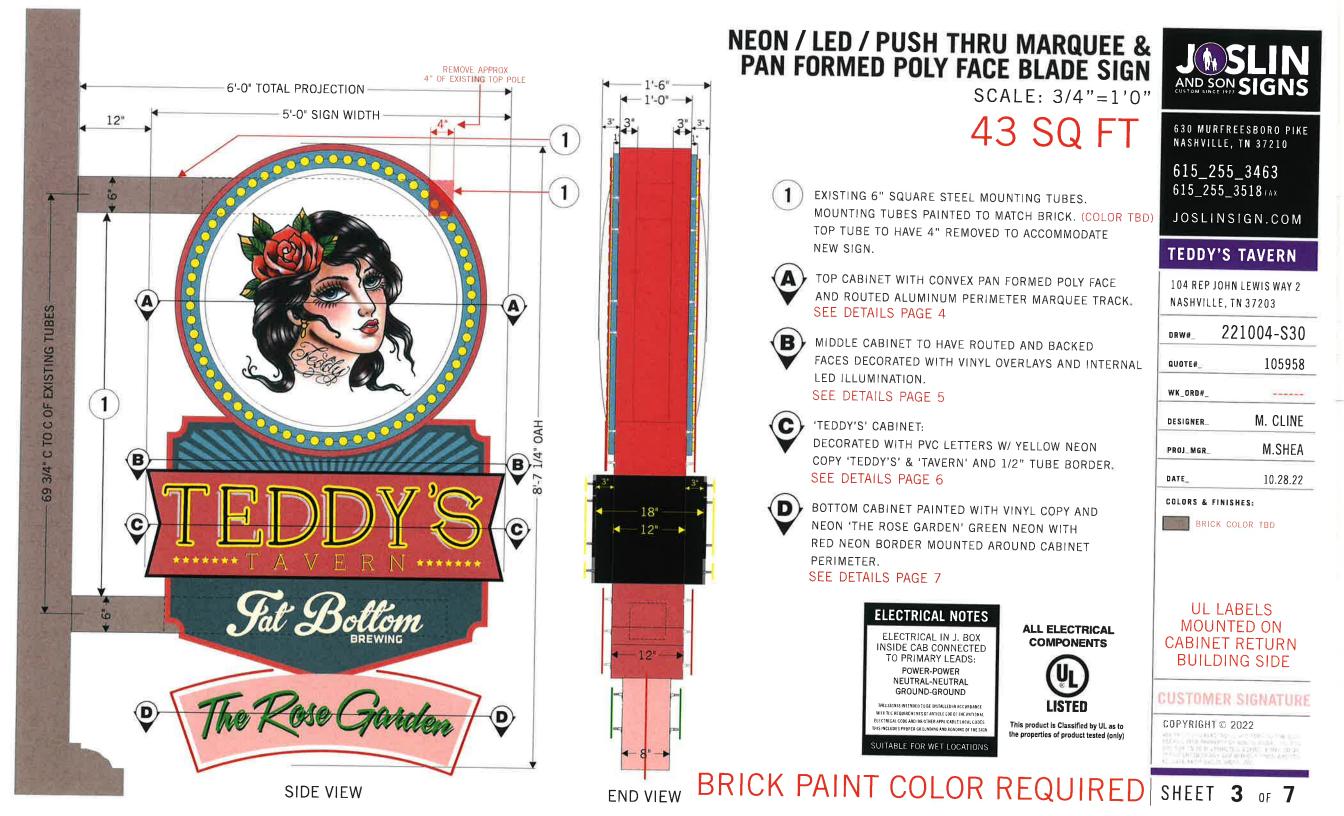
-----

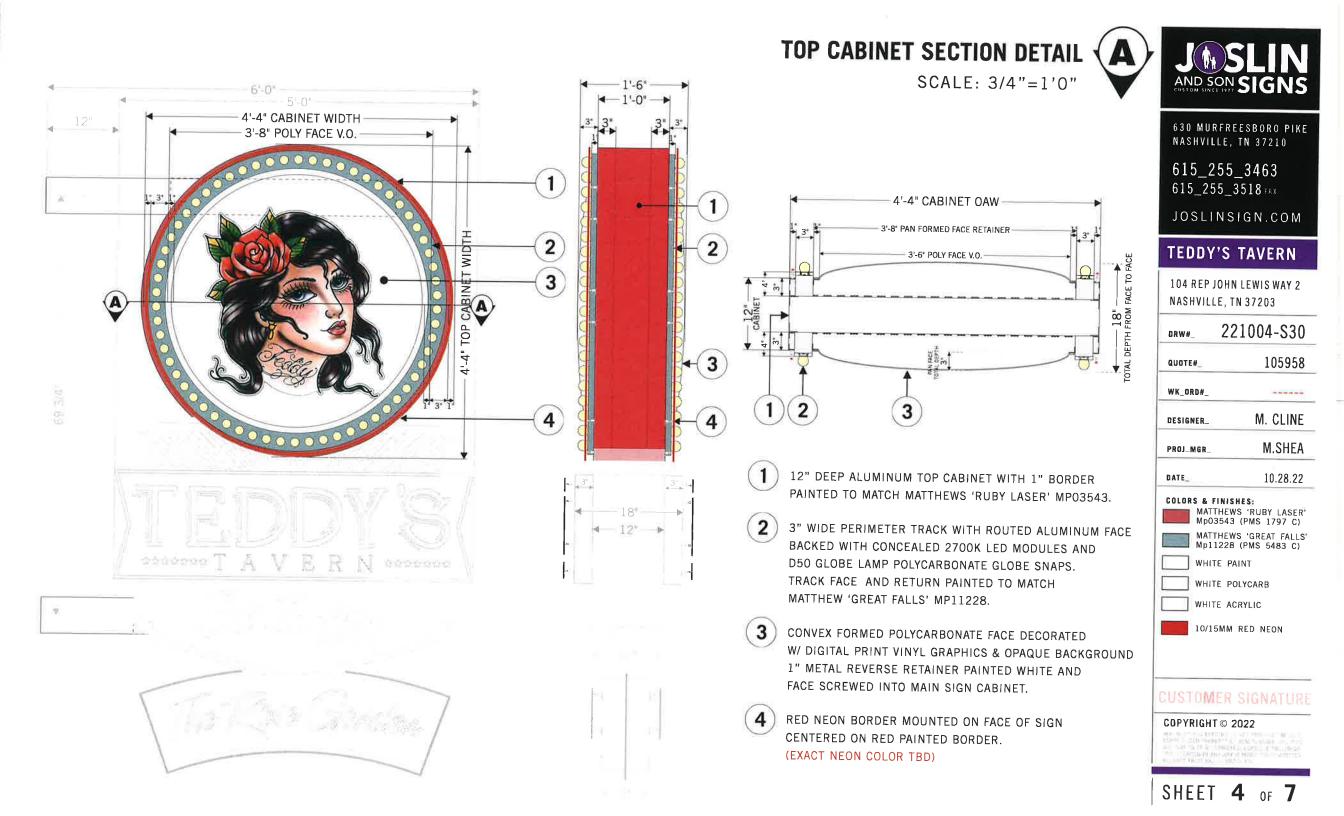
M. CLINE

M.SHEA

10.28.22

SHEET 2 OF 7

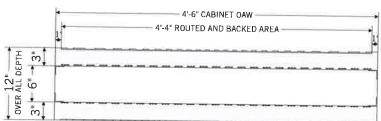






630 MURFREESBORO PIKE

**MIDDLE CABINET SECTION DETAIL** B SCALE: 3/4"=1'0"



### 1 12" DEEP LED ILLUMINATED CABINET WITH ROUTED ALUMINUM FACES BACKED W/ WHITE ACRYLIC. CABINET RETURNS AND 1" PAINTED BORDER ON FACE PAINTED TO MATCH MATTHEWS RUBY LASER Mp03543.

## TOP CABINET SECTION: (SUN RAYS) ROUTED ALUMINUM FACE PAINTED MATTHEWS TSAVORITE GREEN MP13434. BACKED W/ WHITE ACRYLIC DECORATED WITH DIGITAL PRINT VINYL TO MATCH MATTHEWS GREAT FALLS Mp11228.

3 BOTTOM CABINET SECTION: (FAT BOTTOM) ROUTED ALUMINUM FACE PAINTED MATTHEWS TSAVORITE GREEN MP13434. BACKED W/ WHITE ACRYLIC DECORATED WITH DIGITAL PRINT VINYL TO MATCH MATTHEWS BEACH HAVEN MP07502.

4 RED NEON BORDER MOUNTED ON SIGN FACE CENTERED ON RED PAINTED BORDER. (EXACT NEON COLOR TBD)

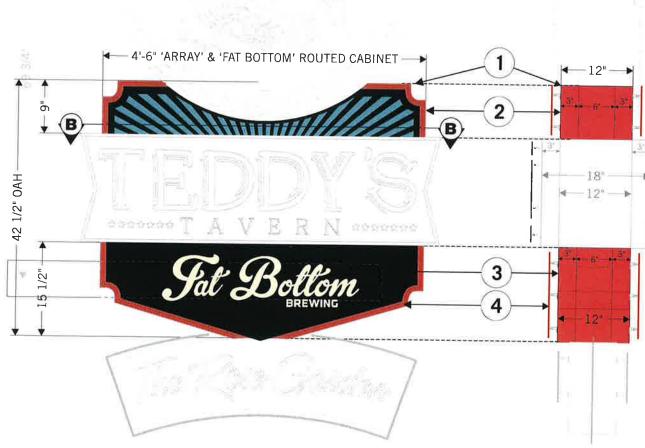


10.28.22 COLORS & FINISHES: MATTHEWS 'RUBY LASER' Mp03543 (PMS 1797 C) MATTHEWS 'TSAVORITE GRE Mp13434 VINYL OVERLAY MATTHEWS 'GREAT FALLS' Mp11228 (PMS 5483 C) VINYL OVERLAY MATTHEWS 'BEACH HAVEN' Mp07502 (PMS 7499 C) WHITE ACRYLIC 10/15MM RED NEON

-----

# CUSTOMER SIGNATURE

COPYRIGHT© 2022



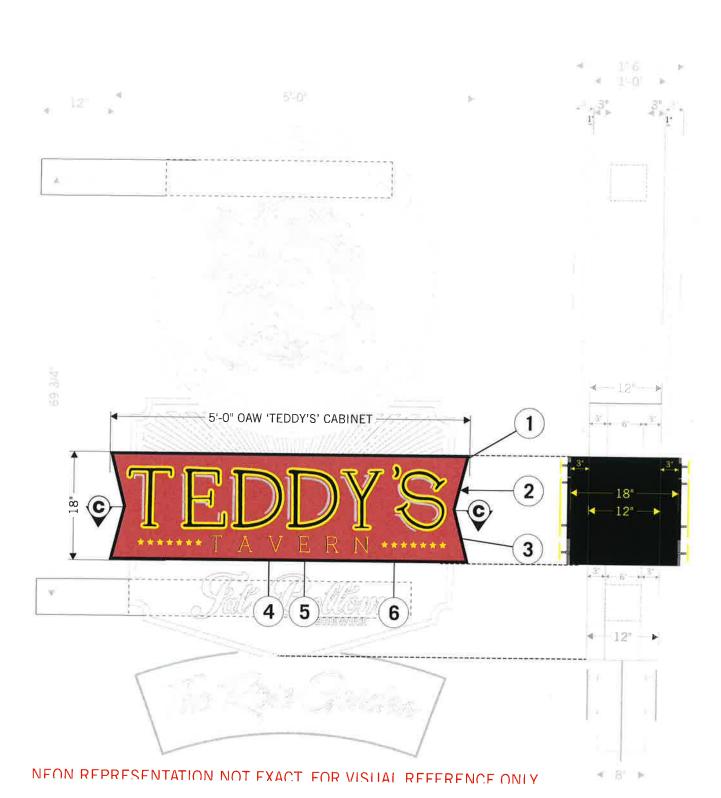
12

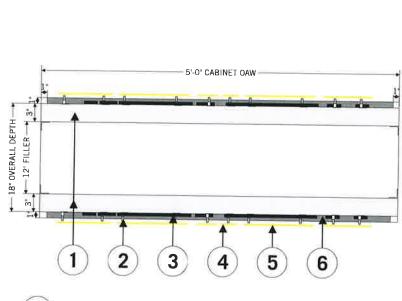
2

4

100







1

**ACCENT CABINET SECTION DETAIL** 

SCALE: 3/4"=1'0"

3" DEEP SINGLE SIDED LED ILLUMINATED CABINETS. FACES PAINTED TO MATCH MATTHEW 'RUBY LASER' Mp03543 AND FACES DECORATED W/ DIGITAL PRINT VINYL ACCENTS TO MATCH MATTHEW 'METRO GRAY' Mp07425. CABINET RETURNS PAINTED MATTHEW 'BLACK IS BLACK' MP59647.

- 2) 1/2" SQUARE TUBE FRAME BORDER MITERED AND WELDED TO FACE PAINTED MATTHEWS 'BACK IS BLACK' MP59647.
- 3 'TEDDY'S' COPY TO BE 1/2" THICK ROUTED BLACK PVC LETTERS MOUNTED FLUSH TO CABINET FACE.
- 4) 'TEDDY'S' COPY TO BE 10MM YELLOW NEON (EXACT NEON COLOR TBV).
- 5 'TAVERN' COPY TO BE 10MM YELLOW NEON (EXACT NEON COLOR TBV).
- 6 'STARS' TO BE 1 1/2" TALL DIMENSIONAL METAL STARS PAINTED MATTHEWS BRIGHT SUN YELLOW (Mp00119) (14 STARS PER SIDE, 28 STARS TOTAL)

drw#_ 2	21004-S30
QUOTE#	105958
WK_ORD#_	
DESIGNER_	M. CLINE
PROJ_MGR_	M.SHEA
DATE_	10.28.22
	SHES: WS 'RUBY LASER' 3 (PMS 1797 C)
MATTHE Mp5964	WS 'BLACK IS BLAC 7
MATTHE Mp0011	WS 'BRIGHT SUN Y 9 (PMS 604 C)
'METRO	MATTHEWS GRAY' 5 (PMS 421 C)
10/15MI	M YLLW NEON
	SIGNATURE

AND SON SIG

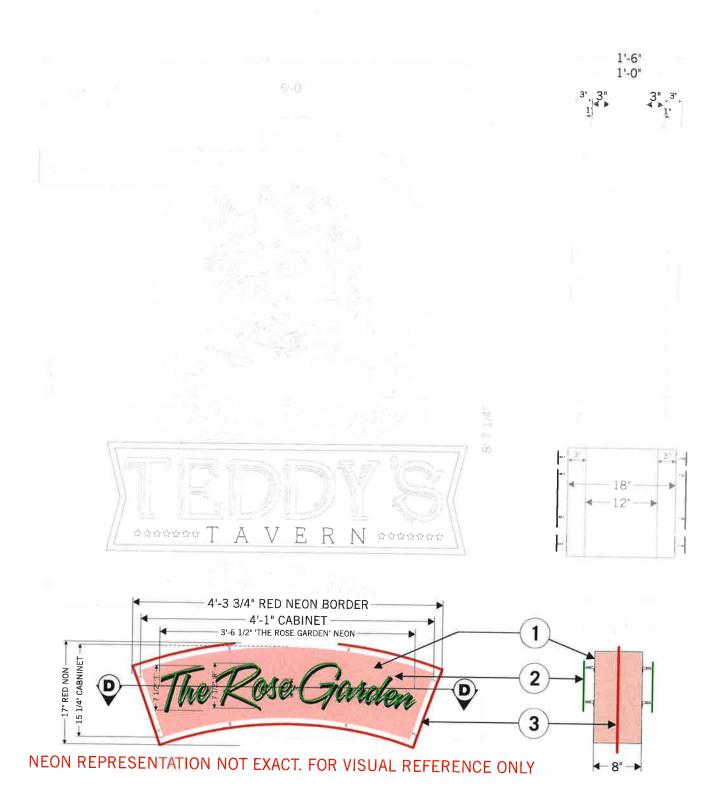
615\_255\_3463 615\_255\_3518 FAX

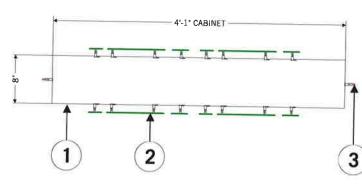
JOSLINSIGN.COM

**TEDDY'S TAVERN** 

630 MURFREESBORO PIKE <u>NASHVILLE, TN</u> 37210

# SHEET 6 OF 7





**BOTTOM CABINET SECTION DETAIL** SCALE: 3/4"=1'0"



2

3

8" DEEP SHAPED CABINET BOTTOM CABINET PAINTED TO MATCH MATTHEWS 'ROSA' MP05957. DECORATED W/ CUT BLACK VINYL 'THE ROSE GARDEN' VINYL OVERLAY.

10MM EMERALD GREEN NEON "THE ROSE GARDEN"

10MM RED NEON BORDER MOUNTED TO PERIMETER OF CABINET.



D

104 REP JOHN LEWIS WAY 2 NASHVILLE, TN 37203

DRW#_	221004-S30
QUOTE#_	105958
WK_ORD#_	for the balance
DESIGNER_	M. CLINE
PROJ_MGR_	M.SHEA
DATE_	10.28.22
COLORS &	FINISHES:
MA <sup>*</sup>	TTHEWS 'ROSA' 05957 (PMS 7605 C)
BLA	CK VINYL
10/	15MM RED NEON
10	M EMERALD NEON



COPYRIGHT © 2022

SHEET 7 OF 7