

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/30/2017

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 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).

	ne terms and conditions of the policy, ertificate holder in lieu of such endors						Cilient On th		inginio to the	
PRODUCER						CONTACT NAME:				
Britton Gallagher One Cleveland Center, Floor 30					PHONE (A/C, No, Ext):216-658-7100 FAX (A/C, No):216-658-7101					
1375 East 9th Street Cleveland OH 44114					ADDRESS: INSURER(S) AFFORDING COVERAGE			NAIC#		
Silvinia Sil 11111					INSURER A :Everest National Insurance Company			10120		
INSURED					INSURER B :LM Ins Corp					
Melrose Pyrotechnics, Inc.					INSURER C: Everest Indemnity Insurance Co.				10851	
Kingsbury Industrial Parkway					INSURER D :Maxum Indemnity Company				26743	
Heinold Ćomplex Kingsbury IN 46345					INSURER E :					
					INSURER F:					
COVERAGES CERTIFICATE NUMBER: 77782182 THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW I								REVISION NUMBER:		
IN C	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	QUIF PERT POLI	REME AIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF AN'	Y CONTRACT THE POLICIE REDUCED BY	OR OTHER I S DESCRIBER PAID CLAIMS	DOCUMENT WITH RESPECT TO D HEREIN IS SUBJECT TO ALL	WHICH THIS	
INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
С				SI8ML00042-171	1/15/2017	The state of the s	1/15/2018	EACH OCCURRENCE \$1,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,0		
								MED EXP (Any one person) \$		
								PERSONAL & ADV INJURY \$1,000	0,000	
								GENERAL AGGREGATE \$2,000		
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- JECT LOC							PRODUCTS - COMP/OP AGG \$2,000	0,000	
A	AUTOMOBILE LIABILITY			SI8CA00025-171		1/15/2017	1/15/2018	COMBINED SINGLE LIMIT (Ea accident) \$1,000	0,000	
	ANY AUTO SCHEDULED							BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$		
	AUTÓS AUTÓS NON-OWNED							PROPERTY DAMAGE (Per accident) \$		
	HIRED AUTOS X AUTOS							(Per accident) \$		
D	UMBRELLA LIAB X OCCUR			EXC6017975		1/15/2017	1/15/2018	EACH OCCURRENCE \$4,000	0.000	
[X EXCESS LIAB CLAIMS-MADE							AGGREGATE \$4,000		
	DED RETENTION\$							\$		
В	WORKERS COMPENSATION			WC734S381029 (IL)		4/4/2017	4/4/2018	X WC STATU- TORY LIMITS OTH- ER USLE	&H Included	
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT \$1,000	0,000	
(Mandatory In NH)		N/A						E.L. DISEASE - EA EMPLOYEE \$1,000	0,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT \$1,000	0,000	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (Attach	ACORD 101, Additional Remarks	Schedule	, If more space is	required)			
LC	lditional Insured extension of covera SPLAY DATE: June 25, 2017 CATION: Naperville Country Club, DDITIONAL INSURED: Naperville C	Nap	erville	e, Illinois					ement.	
	Wolfgen water									
CEI	RTIFICATE HOLDER				CANO	ELLATION				
Naperville Country Club 25 West 570 Chicago Avenue Naperville IL 60540						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							

U.S. Department of Justice

Bureau of Alcohol. Tobacco, Firearms and Explosives

Federal Explosives License/Permit (18 U.S.C. Chapter 40)

In accordance with the provisions of Title XI, Organized Crime Control Act of 1970, and the regulations issued thereunder (27 CFR Part 555), you may engage in the activity specified in this license or permit within the limitations of Chapter 40, Title 18, United States Code and the regulations issued thereunder, until the expiration date shown. THIS LICENSE IS NOT TRANSFERABLE UNDER 27 CFR 555.53. See "WARNINGS" and "NOTICES" on reverse.

Direct ATF Correspondence To ATF - Chief, FELC 244 Needy Road

Martinsburg, WV 25405-9431

License/Permit Number

4-IN-091-24-8A-00529

Chief, Federal Explosives Licensing Center (FELC

Expiration Date

January 1, 2018

Name

MELROSE PYROTECHNICS INC

Premises Address (Changes? Notify the FELC at least 10 days before the move.)

HEINOLD BLDG. S-1-3 KINGSBURY INDUSTRIAL PARK KINGSBURY, IN 46345-0000

Type of License or Permit

24-IMPORTER OF EXPLOSIVES

Purchasing Certification Statement

The licensee or permittee named above shall use a copy of this license or permit to assist a transferor of explosives to verify the identity and the licensed status of the licensee or permittee as provided by 27 CFR Part 555. The signature on each copy must be an original signature. A faxed, scanned or e-mailed copy of the license or permit with a signature intended to be an original signature is acceptable. The signature must be that of the Federal Explosives Licensee (FEL) or a responsible person of the FEL. I certify that this is a true copy of a license or permit issued to the licensee or permittee named above to engage in the business or operations specified above under "Type of License or Permit."

Mailing Address (Changes? Notify the FELC of any changes.)

MELROSE PYROTECHNICS INC P O BOX 302 KINGSBURY, IN 46345-

Licensee/Pennittee Responsible Person Signature

Position/Title

Printed Name

ATF Form 5400 14/5400 15 Part I Revised October 2011

Previous Edition is Obsolete MELROSE PYROTECHNICS INCHEMOLO BLOG S-1-3 KINGSBURY INDUSTRIAL PARK-48345-4-IN-091-24-8A-00526-Lambry 1, 2018:24 IMPORTER OF EXPLOSIVES

Federal Explosives License (FEL) Customer Service Information

Federal Explosives Licensing Center (FELC)

244 Needy Road

Martinsburg, WV 25405-9431

Toll-free Telephone Number: (877) 283-3352

ATF Homepage: www.atf.gov

(304) 616-4401 Fax Number:

E-mail: FELC@atf.gov

Change of Address (27 CFR 555.54(a)(1)). Licensees or permittees may during the term of their current license or permit remove their business or operations to a new location at which they intend regularly to carry on such business or operations. The licensee or permittee is required to give notification of the new location of the business or operations not less than 10 days prior to such removal with the Chief, Federal Explosives Licensing Center. The license or permit will be valid for the remainder of the term of the original license or permit. (The Chief, FELC, shall, if the licensee or permittee is not qualified, refer the request for amended license or permit to the Director of Industry Operations for denial in accordance with § 555.54.)

Right of Succession (27 CFR 555.59). (a) Certain persons other than the licensee or permittee may secure the right to carry on the same explosive materials business or operations at the same address shown on, and for the remainder of the term of, a current license or permit. Such persons are: (1) The surviving spouse or child, or executor, administrator, or other legal representative of a deceased licensee or permittee; and (2) A receiver or trustee in bankruptcy, or an assignee for benefit of creditors. (b) In order to secure the right provided by this section, the person or persons continuing the business or operations shall furnish the license or permit for for that business or operations for endorsement of such succession to the Chief, FELC, within 30 days from the date on which the successor begins to carry on the business or operations.

(Continued on reverse side)

Federal Explosives License/Permit (FEL) Information Card

License/Permit Name: MELROSE PYROTECHNICS INC

Business Name:

License/Permit Number: 4-IN-091-24-8A-00529

License/Permit Type: 24-IMPORTER OF EXPLOSIVES

Expiration:

January 1, 2018

Please Note: Not Valid for the Sale or Other Disposition of Explosives.



Illinois Office of the State Fire Marshal Division of Fire Prevention THIS IS TO CERTIFY THAT

Pyrotechnic Operator License Kim J Mitzel

Has completed all the requirements under the Pyrotechnic Distributor and Operator Act 225 ILCS 227 and is employed by

Melrose Pyrotechnics, Inc.

STATE FIRE MARSHAL

Expires: 07/15/2018 IL06-OP-00030-00159

License #



STATE OF ILLINOIS

OFFICE OF THE STATE FIRE MARSHAL DIVISION OF FIRE PREVENTION

1035 Stevenson Drive • Springfield, IL 62703-4259



Pyrotechnic Distributor License

Melrose Pyrotechnics, Inc. P.O. Box 302 Kingsbury, IN 46345

IL06-OPF-00030

License #

You That

Lawrence T. Matkaitis STATE FIRE MARSHAL

02/15/2018

EXPIRATION DATE

OPF

CLASSIFICATION

This license may be revoked by the Office of the State Fire Marshal for failure to comply with the lawful rules regulating this program.