

Inn on
BILTMORE ESTATE®

November 19, 2013

Buncombe County Commissioners
c/o Kathy Hughes
60 Court Plaza, Room 206
Asheville, NC 28801

Dear Commissioners:

The Inn on Biltmore Estate will be having a New Year's Eve celebration on the night of December 31, 2013. The attendance is expected to be approximately 400 guests. The inn would like to have a fireworks display from 11:50pm – 12:00am.

I have contacted Pyrotechnico out of New Castle, PA who has provided firework displays for The Biltmore Company in the past. They have agreed to provide the display for this event as well. Attached is a copy of the insurance certificate for the event. You will see that The Biltmore Company is named as the additional insured. The fireworks will be launched from the southwest side of Inn on Biltmore Estate as they have been in the past.

I ask your approval of these plans as described. Thank you for your time and attention to this matter.

Sincerely,



Rachel Hudson
Marketing Coordinator
Inn on Biltmore Estate

Attachment



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/14/2013

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).

PRODUCER
MCGRUFF, SEIBELS & WILLIAMS, INC.
P.O. Box 10265
Birmingham, AL 35202

CONTACT
NAME: Melanie Allen
PHONE
(A/C, No, Ext): 800-476-2211
E-MAIL
ADDRESS: mail@mcgriff.com

FAX
(A/C, No):

INSURED
S. Vitale Pyrotechnic Industries, Inc. dba Pyrotecnico
P.O. Box 149
New Castle, PA 16103

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A	RLI Insurance Company	13056
INSURER B	James River Insurance Company	12203
INSURER C	Catlin Specialty Insurance Company	15989
INSURER D		
INSURER E		
INSURER F		

COVERAGES

CERTIFICATE NUMBER: MAENREMA

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	GENERAL LIABILITY			000292605	01/14/2013	01/14/2014	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						Policy Aggregate: \$ 5,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC						
A	AUTOMOBILE LIABILITY			LFT0012741	01/14/2013	01/14/2014	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS		<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input checked="" type="checkbox"/> T'lr InterChg \$1mil		<input type="checkbox"/> NON-OWNED AUTOS				Comp. \$2500 deductible Coll. \$2500 deductible
B	UMBRELLA LIAB			000292625	01/14/2013	01/14/2014	EACH OCCURRENCE \$ 4,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB						AGGREGATE \$ 4,000,000
	<input type="checkbox"/> CLAIMS-MADE						\$
	DED						
	RETENTION \$						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU-TORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTHER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$
C	EXCESS UMBRELLA COVERAGE			XSA2002600114	01/14/2013	01/14/2014	XS Underlying \$4, Mil \$ 5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Fireworks Display Date: December 31, 2013 Rain Date: January 1, 2014

Location: Inn on Biltmore Estate, 1 Antler Hill Rd., Asheville, NC 28803

The Biltmore Company

The above listed are Additional Insured respects to General Liability policy as required by written contract subject to policy terms, conditions and exclusions.

The Certificate Holder is Additional Insured with respect to General Liability as required by written contract.

CERTIFICATE HOLDER

CANCELLATION

Inn on Biltmore Estate
One North Park Square
Asheville, NC 28801

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