

Inn on  
BILTMORE ESTATE®

November 20, 2012

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, 2012. 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. Enclosed 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

Enclosure



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/30/2012

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

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

FAX (A/C, No):

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

## INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A :United States Fire Insurance Company

21113

INSURER B :James River Insurance Company

12203

INSURER C :Callin Specialty Insurance Company

15989

INSURER D :

INSURER E :

INSURER F :

## COVERAGES

CERTIFICATE NUMBER:92GJLBTU

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			000292604	01/14/2012	01/14/2013	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Policy Aggregate: \$ 5,000,000
	<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 checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						
A	AUTOMOBILE LIABILITY			1337318064	01/14/2012	01/14/2013	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Comp. \$1000 deductible Coll. \$1000 deductible
	<input checked="" type="checkbox"/> ANY AUTO						
	<input type="checkbox"/> ALL OWNED AUTOS						
	<input checked="" type="checkbox"/> HIRED AUTOS						
	<input checked="" type="checkbox"/> Tdr InterChg \$1mil						
	<input type="checkbox"/> SCHEDULED AUTOS						
	<input checked="" type="checkbox"/> NON-OWNED AUTOS						
B	UMBRELLA LIAB			000292624	01/14/2012	01/14/2013	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB						
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH)						E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$
C	EXCESS UMBRELLA COVERAGE			XSA2002600113	01/14/2012	01/14/2013	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, 2012 Rain Date: January 1, 2013

Location: Inn on Biltmore Estates, One North Park Square, Asheville, NC 28801

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

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

## 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

*Paul B. B. B. B.*