



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/17/2025

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 have ADDITIONAL INSURED provisions or 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		CONTACT NAME: Certs@paciaonline.com
Professional Concepts Insurance Agency, Inc. 109 East North St.		PHONE (A/C, No, Ext): (800) 969-4041 FAX (A/C, No): (800) 969-4081
Brighton MI 48116		E-MAIL ADDRESS: Certs@paciaonline.com
		INSURER(S) AFFORDING COVERAGE NAIC #
		INSURER A: Citizens Ins Co of America 31534
INSURED		INSURER B: Citizens Ins of Midwest 10395
Rowe Professional Services Company 540 S Saginaw St Ste 200 Flint MI 48502		INSURER C: XL Specialty Insurance Company 37885
		INSURER D:
		INSURER E:
		INSURER F:

COVERAGES CERTIFICATE NUMBER: 26-27 All 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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR X, C, U Contractual Liability	Y	Z7H-M229553-00	01/01/2026	01/01/2027	EACH OCCURRENCE	\$ 1,000,000	
	DAMAGE TO RENTED PREMISES (Ea occurrence)					\$ 1,000,000		
	MED EXP (Any one person)					\$ 15,000		
	PERSONAL & ADV INJURY					\$ 1,000,000		
	GENERAL AGGREGATE					\$ 2,000,000		
	PRODUCTS - COMP/OP AGG					\$ 2,000,000		
OTHER:	Architects & Engineers	\$						
B	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	Y	AWH-M229557-00	01/01/2026	01/01/2027	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
	BODILY INJURY (Per person)					\$		
	BODILY INJURY (Per accident)					\$		
	PROPERTY DAMAGE (Per accident)					\$		
	Uninsured motorist					\$ 1,000,000		
	OTHER:							
A	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		U7H-M229556-00	01/01/2026	01/01/2027	EACH OCCURRENCE	\$ 10,000,000	
	AGGREGATE					\$ 10,000,000		
	OTHER:					\$		
	PER STATUTE							
	E.L. EACH ACCIDENT					\$ 1,000,000		
	E.L. DISEASE - EA EMPLOYEE					\$ 1,000,000		
E.L. DISEASE - POLICY LIMIT	\$ 1,000,000							
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N <input checked="" type="checkbox"/> N	N / A	W7H M188856 00	01/01/2026	01/01/2027	PER STATUTE	OTHER
	E.L. EACH ACCIDENT						\$ 1,000,000	
C	Professional Liability Pollution Liability			DPR5051772	01/01/2026	01/01/2027	Per Claim	\$ 5,000,000
	Ann Aggregate						\$ 5,000,000	

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

Delta College, is elected and appointed officials, employees, students, volunteers, and agents are considered Additional Insured as respects to the General Liability and Auto Liability Policies and would apply so long as required within a written contract.

CERTIFICATE HOLDER

CANCELLATION

Delta College 1961 Delta Road		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
University Center		AUTHORIZED REPRESENTATIVE <i>Michael Corgrave</i>
MI 48710		

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