Contract of Pyroman Fireworks 2, LLC

Pyroman	i Fireworks 2, LLC
This agreement entered on by and <u>City of Vicksburg, MS</u> party of the second part.	and between <u>Pyroman Fireworks 2, LLC</u> party of the first part
<u>Vicksburg, MS</u> and approved by <u>Pyroman Fireworks 2, LL</u> that was mutually agreed upon. We reserve the right to not reduce the value of the program that was agreed upon	cksburg, MS on July 4, 2025 in a location designated by City of Cone exhibition of fireworks, in accordance with the program make substitutions of equal or greater value as long as it does on. The cost of this program is based on the value of the shells 2, LLC agrees to furnish sufficient labor to set up and shoot the
<u>Pyroman Fireworks 2, LLC</u> agrees to inspect the area the unexploded shells or live components. Furthermore, <u>City</u> of fallout debris that may remain on the property after the and all necessary permits and license, which may be requ	at least a period of 30 minutes after the exhibition is fired
<u>Pyroman Fireworks 2, LLC</u> agrees to furnish insurance, Pu amount of two Million Dollars to <u>City of Vicksburg, MS</u> .	ublic Liability and Property damage in a General Aggregate
delivered to the site of actual cost incurred. If <u>City of Vick</u> leaving our warehouse there will be an administration fee up, <u>City of Vicksburg</u> , <u>MS</u> agrees to pay 50% of the contra agreed by the parties hereto that in the event the firework	or inclement weather, a postponement may be made to a date there will be a postponement fee, if the display has been ksburg, MS notifies us of a postponement prior to the display a for cost incurred. In the event of total cancellation before set act price plus expenses incurred. It is also understood and rks have been taken out and set up before any rain then such assible manner without any deductions whatever from the
<u>Pyroman Fireworks 2, LLC</u> shall not incur any liability for a due to causes beyond its control without limitation to leg	any loss or for any failure to perform any obligation hereunder all or regulatory restrictions.
<u>City of Vicksburg, MS</u> agrees to pay the total contract pric on or prior the day the exhibition is performed.	te of \$46,000.00 be paid to Pyroman Fireworks 2, LLC prior to
The fireworks program will have a duration of approximat By:	tely 30 minutes By:
Craig W. George Pyroman Fireworks 2, LLC	George Flaggs, Mayor City of Vicksburg

P.O. Box 150

Vicksburg, MS 39181

104 Lynn Circle

Natchitoches, LA 71457



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/14/2025

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 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).

C	ertificate holder in lieu of such endors	sem	ent(s)).	nuorse	ement. A sta	tement on th	ils certificate do	es not co	onfer ri	ghts to the	
PRODUCER The Partners Group Ltd 1111 Lake Washington Blvd N.					CONTACT NAME: Sally Boice							
					PHONE (A/C, No, Ext): 425-897-6026				FAX (A/C, No): 425-455-6727			
Su	ite 400				I E-MAII	ss: sboice@t			1770, 110).	120 100	, 01L1	
Renton WA 98056						INSURER(S) AFFORDING COVERAGE					NAIC#	
					INSURER A : Everest Indemnity Insurance Co						10851	
INSURED 47628 Pyroman Fireworks 2, LLC					INSURER B: Everest Denali Insurance Company					16044		
1 104 Lynn Circle					INSURER C: General Star Indemnity Co.						37362	
Natchitoches LA 71457					INSURER D:						0.002	
						INSURER E :						
			1111		INSURER F:							
COVERAGES CERTIFICATE NUMBER: 1701328616 REVISION NUMBER:												
CI	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	SUBR		DELIVI	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)					
A	GENERAL LIABILITY	Y	WVD	APP10985231		(MM/DD/YYYY) 10/11/2024	(MM/DD/YYYY) 10/11/2025	LIMITS				
	X COMMERCIAL GENERAL LIABILITY					, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 5	DAMAGE TO RENTE	D	\$ 1,000,0		
	CLAIMS-MADE X OCCUR							PREMISES (Ea occurrence) \$ 500,0				
								PERSONAL & ADV IN	(Any one person) \$ Exclud			
								GENERAL AGGREGA	11,000,000			
	GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMP		\$ 2,000,0		
	POLICY PRO- JECT LOC					(v)		THOSE OF COMIT	\$		00	
В	AUTOMOBILE LIABILITY			APP11800231		10/11/2024	10/11/2025	COMBINED SINGLE (Ea accident)	LIMIT	LIMIT		
	ANY AUTO							BODILY INJURY (Per		\$ 1,000,0 \$	00	
	ALL OWNED X SCHEDULED AUTOS X NON-OWNED					1,11		BODILY INJURY (Per	accident)	\$		
	X HIRED AUTOS X NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)		\$		
								(i oi doordorik)		\$		
С	UMBRELLA LIAB OCCUR			IXG673234C		10/11/2024	10/11/2025	EACH OCCURRENCE	E	\$ 4,000,0	00	
	X EXCESS LIAB CLAIMS-MADE							AGGREGATE		\$ 4,000,0		
DED RETENTION \$ WORKERS COMPENSATION										\$		
AND EMPLOYERS' LIABILITY								WC STATU- TORY LIMITS	OTH- ER			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		N/A						E.L. EACH ACCIDENT				
(Mandatory in NH) If yes, describe under								E.L. DISEASE - EA EMPLOYEE \$				
DESCRIPTION OF OPERATIONS below								E.L. DISEASE - POLIC	CY LIMIT	\$		
								VIII CONTRACTOR				
					h 1, 3						, # F	
DESC	PIRTION OF OPERATIONS // COATIONS ///EUR										2 2 1	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) The following are included as Additional Insured on General Liability as their interest may appear as respects operations performed by or on behalf of the Named Insured, as required by written contract: Additional Insured(s): Vicksburg 4th of July Celebration, The Mayor and Aldermen of the City of Vicksburg, MS Display Date: 7-4-2025 Rain Date 7-5-2025 Fireworks Display Location: Yazoo Canal-Mississippi River Vicksburg, MS												
CEP	TIFICATE HOLDER				04110	F11 AF151						
CERTIFICATE HOLDER CANCELLATION												
City of Vickburg, MS P.O. Box 150 Vicksburg MS 39181 USA					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							
	UDA HODA											

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