



# CERTIFICATE OF AIRCRAFT INSURANCE

07/01/2025

DATE (MM/DD/YYYY)

07/01/2024

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).

<b>PRODUCER</b> Lockton Companies 3280 Peachtree Road NE, Suite #1000 Atlanta GA 30305 (404) 460-3600	<b>CONTACT NAME:</b> _____		
	<b>PHONE (A/C, No. Ext):</b> _____	<b>FAX (A/C, No):</b> _____	
<b>E-MAIL ADDRESS:</b> _____			
<b>PRODUCER CUSTOMER ID #:</b> _____			
<b>INSURER(S) AFFORDING COVERAGE</b>			
<b>INSURED</b> 28 Lake Superior Helicopters, LLC dba Lake Superior Helicopters, Heli Co., and Heli Co. New Orleans; Ascent Aviation 4525 Airport Approach Rd. Duluth MN 55811	<b>INSURER A:</b> National Union Fire Ins Co Pitts. PA	100	19445
	<b>INSURER B:</b>		
	<b>INSURER C:</b>		
	<b>INSURER D:</b>		
	<b>INSURER E:</b>		
	<b>INSURER F:</b>		

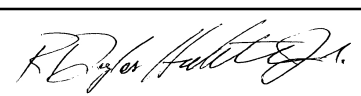
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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.

<b>POLICY INFORMATION</b>		<b>CERTIFICATE NUMBER: 463</b>		<b>REVISION NUMBER:</b>	
<b>POLICY TYPE</b>			<b>LINE OF BUSINESS SUBCODE</b>		
<input type="checkbox"/> INDUSTRIAL AID	<input type="checkbox"/> PLEASURE & BUS	<input checked="" type="checkbox"/> COMMERCIAL	<input type="checkbox"/> AIRPLANE	<input checked="" type="checkbox"/> HELICOPTER	<input type="checkbox"/> MIXED FLEET
<input type="checkbox"/> NON-OWNED			<input type="checkbox"/> LIABILITY ONLY	<input type="checkbox"/> HULL & LIABILITY	<input checked="" type="checkbox"/> HULL ONLY
				<input type="checkbox"/> EXCESS	<input checked="" type="checkbox"/> QUOTA SHARE

<b>AIRCRAFT INFORMATION</b>		<b>ACORD 333, Aircraft Schedule attached</b>			
<b>YEAR</b>	<b>MAKE</b>	<b>MODEL</b>	<b>SERIAL NUMBER</b>	<b>REGISTRATION NUMBER</b>	
	See Attached				
<b>TERRITORY:</b>					

<b>AIRCRAFT COVERAGES</b>					
<b>INSURER LETTER</b>	<b>POLICY NUMBER</b>	<b>EFFECTIVE DATE</b>	<b>EXPIRATION DATE</b>	<b>ADDITIONAL INSURED? (Y / N)</b>	<b>SUBROGATION WAIVED? (Y / N)</b>
A	FV 042670835-04.	07/01/2024	07/01/2025	Y	N
<b>COVERAGE</b>	<b>OPTIONS</b>		<b>LIMIT</b>	<b>APPLIES TO</b>	<b>LIMIT</b>
<b>AIRCRAFT HULL</b>	<input checked="" type="checkbox"/> Not In Motion		See Below	Insured value	\$XXXXXXXX
	<input checked="" type="checkbox"/> In Motion		See Below		
<b>AIRCRAFT LIABILITY</b>			\$See Below	EA OCC	\$XXXXXXXX
			\$See Below	EA PASS	\$XXXXXXXX
<b>MEDICAL PAYMENTS</b>	<input checked="" type="checkbox"/> INCLUDING CREW		\$5,000	EA PER	
	<input type="checkbox"/> EXCLUDING CREW				
<b>COVERAGE</b>	<b>OPTIONS</b>		<b>LIMIT</b>	<b>APPLIES TO</b>	<b>LIMIT</b>
<b>CODE</b>	<b>DESCRIPTION</b>				
			\$XXXXXXXX		\$XXXXXXXX
			\$XXXXXXXX		\$XXXXXXXX
			\$XXXXXXXX		\$XXXXXXXX
			\$XXXXXXXX		\$XXXXXXXX
			\$XXXXXXXX		\$XXXXXXXX

<b>DESCRIPTION OF OPERATIONS / REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)</b>
La Crosse County Agricultural Society, Inc. and their agents and/or employees shall be included as Additional Insured(s) hereunder solely with respect to the operations of the Named Insured.

<b>CERTIFICATE HOLDER</b>	<b>CANCELLATION</b>
<b>463</b> La Crosse County Agricultural Society, Inc. and their agents and/or employees Po Box 52 West Salem WI 54699-0052	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 

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Lake Superior Helicopters, Inc.  
2024 - 2025 Aircraft Schedule

<u>Year</u>	<b>Make and Model</b>	<b>Reg. No</b>	<b>Seating Crew/Pax</b>	<b>Insured Value</b>	<b>NIM Deductible</b>	<b>IM Deductible</b>
2006	Robinson R44	N4911X	1/3	\$355,000	\$5,000	\$17,750
2015	Robinson R44	N344ES	1/3	\$375,000	\$5,000	\$18,750
2002	Robinson R44	N3231J	1/3	\$405,000	\$5,000	\$20,250
2013	Robinson R44	N839RM	1/3	\$315,000	\$5,000	\$15,750
2004	Robinson R44	N204D	1/3	\$275,000	\$1,000	\$13,750
2003	Robinson R44	N928KP	1/3	\$475,000	\$5,000	\$23,750