

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/25/2014

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

	e terms and conditions of the policy		-		ndorse	ment. A stat	ement on th	is certificate does not co	onfer	rights to the		
PRO	DUCER				CONTAC NAME:	СТ						
MARSH USA, INC. 99 HIGH STREET						PHONE FAX (A/C, No, Ext): (A/C, No):						
BOSTON, MA 02110						E-MAIL ADDRESS:						
Attn: Boston.certrequest@Marsh.com Fax: 212-948-4377												
577500 AL 4445						INSURER(S) AFFORDING COVERAGE INSURER A : James River Insurance Company						
577522AL-14-15										12203		
INSURED Rasier LLC, Rasier-CA LLC, Rasier-DC LLC					INSURER B:							
706 Mission St. 9th Floor					INSURER C:							
San Francisco, CA 94103					INSURER D:							
					INSURE	RE:						
					INSURER F:							
				NUMBER:	NYC-006819892-03 REVISION NUMBER: 6							
IN CI	IIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RIESTIFICATE MAY BE ISSUED OR MAY CLUSIONS AND CONDITIONS OF SUCH	EQUIF PERT POLI	REME	NT, TERM OR CONDITION THE INSURANCE AFFORDS LIMITS SHOWN MAY HAVE	OF ANY	Y CONTRACT THE POLICIES REDUCED BY	OR OTHER DESCRIBED PAID CLAIMS.	DOCUMENT WITH RESPEC	CT TO	WHICH THIS		
LTR	TYPE OF INSURANCE	INSR	WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	S			
	GENERAL LIABILITY							EACH OCCURRENCE DAMAGE TO RENTED	\$			
	COMMERCIAL GENERAL LIABILITY							PREMISES (Ea occurrence)	\$			
	CLAIMS-MADE OCCUR							MED EXP (Any one person)	\$			
								PERSONAL & ADV INJURY	\$			
								GENERAL AGGREGATE	\$			
	GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMP/OP AGG	\$			
	POLICY PRO- JECT LOC			0.4.07.004.70		00/44/0044	02/14/2015	COMBINED SINGLE LIMIT	\$			
Α	AUTOMOBILE LIABILITY			CA43600179		03/14/2014	03/14/2015	(Ea accident)	\$			
	ANY AUTO							BODILY INJURY (Per person)	\$	50,000		
	ALL OWNED SCHEDULED AUTOS NON-OWNED							BODILY INJURY (Per accident)	\$	100,000		
	HIRED AUTOS NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)	\$	25,000		
	X Pre-TripAccept								\$			
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$			
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$			
	DED RETENTION \$								\$			
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							WC STATU- OTH- TORY LIMITS ER				
	ANY PROPRIETOR/PARTNER/EXECUTIVE N	N/A						E.L. EACH ACCIDENT	\$			
	(Mandatory in NH)	II, A						E.L. DISEASE - EA EMPLOYEE	\$			
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$			
	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC dditional Page	LES (A	Attach	ACORD 101, Additional Remarks \$	Schedule	, if more space is	required)					
0007	additional rage											
CEI	RTIFICATE HOLDER				CANC	PELL ATION						
OEKTII IOATE HOEDEK					CANCELLATION							
Rasier LLC 706 Mission St 9th Floor San Francisco, CA 94103						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 of Marsh USA Inc.							
						Manashi Mukheriee Manashi Mukheriee						

AGENCY CUSTOMER ID: 577522

Loc #: Boston



ADDITIONAL REMARKS SCHEDULE

Page 2 of 2

AGENCY	NAMED INSURED					
MARSH USA, INC.	Rasier LLC, Rasier-CA LLC, Rasier-DC LLC 706 Mission St. 9th Floor					
POLICY NUMBER		San Francisco, CA 94103				
CARRIER	NAIC CODE					
		EFFECTIVE DATE:				

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

- 1. Pursuant to policy terms and conditions:
- a. "Named Operators" are drivers that have entered into a contract with a Named Insured (including Rasier LLC) prior to the time of an accident.
- b. Covered autos are any auto while the auto is being used when the Named Operator:
 - i) has logged into the Uber application, and
 - ii) is available to receive requests for transportation services from passenger(s) through the Uber application; and
- iii) has not accepted a request for transportation services from passenger(s) through the Uber application, and is not en route to pick up such passenger(s), and is not transporting such passengers(s) to their destination.
- c. Named operators are insureds and Coverage is contingent on Named Operator's personal auto policy not applying to the loss
- 2. This is an evidence of coverage certificate