



# 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 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> Marsh & McLennan Agency LLC Small Business Unit 3625 N Elm Street, Suite 200 Greensboro NC 27455	<b>CONTACT</b> <b>NAME:</b> Elizabeth Gallimore <b>PHONE</b> (A/C, No, Ext): 336-346-1391 <b>E-MAIL</b> <b>ADDRESS:</b> Elizabeth.Gallimore@marshmma.com	<b>FAX</b> (A/C, No): 212-607-6552
<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
<b>INSURER A:</b> Hartford Underwriters Insurance Company		30104
<b>INSURER B:</b> Hartford Accident and Indemnity Company		22357
<b>INSURER C:</b> AIG Europe S.A.		55555
<b>INSURER D:</b>		
<b>INSURER E:</b>		
<b>INSURER F:</b>		

**COVERAGES****CERTIFICATE NUMBER:** 1299680738**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	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:			22SBMBG6HKY	5/29/2025	5/29/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			22SBMBG6HKY	5/29/2025	5/29/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			22SBMBG6HKY	5/29/2025	5/29/2026	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N <input type="checkbox"/>	N / A	22WECBG6KSH	5/29/2025	5/29/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Global Professional Liability			BF33005556	1/1/2025	12/31/2025	Annual Aggregate €1.000.000 EUR
C	Global Public Liability			BF33005556	1/1/2025	12/31/2025	Each and Every Loss €1.250.000 EUR
C	Global Cyber Liability			BFCE002315	1/1/2025	12/31/2025	Per Policy Period €1.000.000 EUR

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

The Global Professional Liability, Public Liability and Cyber Liability for policy numbers BF33005556 and BFCE002315 placement was made by Marsh Brussels. Marsh USA INC has only acted in the role of a consultant to the client with respect to this placement, which is indicated here for your convenience. Those usual to the Insured's Operations.

**CERTIFICATE HOLDER****CANCELLATION**

For Informational Purposes  
77 SANDS ST  
BROOKLYN NY 11201-1431

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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# INSURANCE CERTIFICATE

The company Marsh S.A., Insurance Broker, confirms herewith that Checkroom is insured within the framework of an insurance policy which regroups following characteristics:

<b>Policyholder</b>	Cheqroom
<b>Address</b>	Wiedauwkaai, 23X 9000 Gent
<b>Insured entit(y)(ies)</b>	the Policyholder and its subsidiaries
<b>Insurer</b>	AIG Europe S.A., Belgium Branch Pleinlaan 11 B-1050 Brussels
<b>Policy number</b>	BFCE002315
<b>Type of insurance</b>	Cyber risks
<b>Insured limit</b>	1.000.000 € per Insurance period
<b>Deductible</b>	5.000 € per Loss/Claim
<b>Insurance period</b>	01/01/2025 - 31/12/2025

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Made in Brussels, January 30, 2025

For Marsh S.A.

*Anne-Sophie Coppens*

30-01-2025 | 10:03 CET

Anne-Sophie COPPENS  
Cyber Practice Leader BeLux

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*This certificate is issued as a matter of information only and confers no rights upon the certificate holder; the certificate does not amend, extend or alter the coverage afforded by the policies above.*

## Insurance certificate

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The company Marsh S.A., Insurance Broker, confirms herewith that **Cheqroom**, at Wiedauwkaai 23X, 9000 Gent, and its subsidiaries, are insured within the framework of an insurance policy which regroups following characteristics:

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<b>Insured</b>	:	Cheqroom NV
<b>Insurers</b>	:	AIG Europe SA
<b>Policy Number</b>	:	BF33005556
<b>Insured Limits</b>	:	<b>Professional Liability ( Tech E&amp;O ) + Cyber Liability :</b> 1.000.000 EUR each and every loss and in the annual aggregate  <b>Public Liability :</b> 1.250.000 EUR each and every loss  <b>Product Liability :</b> 1.250.000 EUR each and every loss and in the annual aggregate
<b>Insured Period</b>	:	Inception date: 01/01/2025 Expiring date: 31/12/2025

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Made in Brussels, 12 May 2025



Insurance Broker  
CBE Brussels 0403.276.906  
F.S.M.A. 014192 A  
Avenue Hermann-Debrouxlaan 2,  
B-1160 Brussels

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