

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/22/2023

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					
MARSH USA, LLC.				NAME: PHONE (A/C, No, Ext): (A/C, No):					
1166 Avenue of the Americas New York, NY 10036				(A/C, No, Ext): (A/C, No): E-MAIL ADDRESS:					
Attn: NewYork.Certs@marsh.com Fax: 212-948-0500									
01111				INSURER(S) AFFORDING COVERAGE					
OLIN . 072015				INSURER A : Old Republic Insurance Company				24147	
INSURED OLIN CORPORATION				INSURER B: N/A					
190 CARONDELET PLAZA				INSURER C:					
SUITE 1530 CLAYTON, MO 63105				INSURER D:					
OLATION, MO 00100				INSURER E:					
				INSURER F:					
COVERAGES CER	TIFICA	TE NUMBER:	NYC	-009451381-41		REVISION NUMBER: 1	0		
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.									
			BEEN						
	ADDL SUI			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT		0.000.000	
A X COMMERCIAL GENERAL LIABILITY		MWZY 313962 23	.1.1	07/01/2023	07/01/2024	EACH OCCURRENCE DAMAGE TO RENTED	\$	9,900,000	
CLAIMS-MADE X OCCUR		'\$100,000 SIR Each Occ Applicab	лe			PREMISES (Ea occurrence)	\$	250,000	
						MED EXP (Any one person)	\$	N/A	
						PERSONAL & ADV INJURY	\$	9,900,000	
GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	10,000,000	
X POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	10,000,000	
OTHER:							\$		
A AUTOMOBILE LIABILITY		MWTB 313954 23		07/01/2023	07/01/2024	COMBINED SINGLE LIMIT (Ea accident)	\$	5,000,000	
X ANY AUTO						BODILY INJURY (Per person)	\$		
OWNED SCHEDULED						BODILY INJURY (Per accident)	\$		
AUTOS ONLY AUTOS NON-OWNED						PROPERTY DAMAGE	\$		
AUTOS ONLY AUTOS ONLY						(Per accident)	\$		
UMBRELLA LIAB OCCUB						EAGU GOOLIDDENIGE			
EVOTOD LIAB						EACH OCCURRENCE	\$		
CLAING-WADL						AGGREGATE	\$		
DED RETENTION \$ A WORKERS COMPENSATION		MWC 313959 23		07/01/2023	07/01/2024	X PER OTH-	\$		
AND EMPLOYERS' LIABILITY		WWW 0 10303 20		0170172020	0770172021	STATUTE ER		2 000 000	
ANYPROPRIETOR/PARTNER/EXECUTIVE N	N/A					E.L. EACH ACCIDENT	\$	2,000,000	
(Mandatory in NH) If yes, describe under						E.L. DISEASE - EA EMPLOYEE	\$	2,000,000	
DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	7,000,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)									
Evidence of Insurance Only									
CERTIFICATE HOLDER	ANCELLATION								
CERTIFICATE HOLDER				CANCELLATION					
Olin Corporation 190 Carondelet Plaza Suite 1530 Clayton, MO 63105				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					
						Marsh U.S.A -	11	0	