



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/12/2022

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 PROGRESSIVE COMMERCIAL PO BOX 94739 CLEVELAND, OH 44101	CONTACT NAME: PHONE (A/C No. Ext): _____ FAX (A/C, No): _____ E-MAIL ADDRESS: _____
INSURER(S) AFFORDING COVERAGE	
INSURER A : United Financial Casualty Company NAIC # 11770	
INSURER B : _____	
INSURER C : _____	
INSURER D : _____	
INSURER E : _____	
INSURER F : _____	

COVERAGES **CERTIFICATE NUMBER:** **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
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: _____						EACH OCCURRENCE \$ _____ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ _____ MED EXP (Any one person) \$ _____ PERSONAL & ADV INJURY \$ _____ GENERAL AGGREGATE \$ _____ PRODUCTS - COMP/OP AGG \$ _____ \$ _____
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY			01230832	10/01/2022	10/01/2023	COMBINED SINGLE LIMIT (Ea accident) \$ _____ BODILY INJURY (Per person) \$ 75,000 BODILY INJURY (Per accident) \$ 150,000 PROPERTY DAMAGE (Per accident) \$ 25,000 \$ _____
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED _____ RETENTION \$ _____						EACH OCCURRENCE \$ _____ AGGREGATE \$ _____ \$ _____
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / N <input checked="" type="checkbox"/> N / A (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ _____ E.L. DISEASE - EA EMPLOYEE \$ _____ E.L. DISEASE - POLICY LIMIT \$ _____

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

A Designated TNC driver is a "transportation network company driver" that is operating a motor vehicle in connection with the named insured's "TNC" operations and is logged into the "digital network" but is not engaged in a "TNC prearranged trip".

This policy is in compliance with the financial responsibility requirements of Vehicle and Traffic Law section 1693(2)(a) and regulations promulgated thereunder but does not provide coverage as provided under Vehicle and Traffic Law section 1693(3)(a).

CERTIFICATE HOLDER Designated TNC Drivers	CANCELLATION 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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ADDITIONAL REMARKS SCHEDULE

AGENCY PROGRESSIVE COMMERCIAL		NAMED INSURED Lyft, Inc. 185 Berry St., Suite 5000 San Francisco, CA 94107	
POLICY NUMBER 01230832		EFFECTIVE DATE: 10/01/2022	
CARRIER United Financial Casualty Company	NAIC CODE 11770		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

Coverage afforded by the policy referenced herein may be excess over any valid and collectible commercial auto policy or personal auto policy pursuant to the New York Vehicle and Traffic Law Article 44-B.

In the event of any change in, or cancellation of the policy, the Company will mail or deliver notice to the first Named Insured, who is responsible under the terms of the Policy to notify all Certificate Holders. Failure of the first Named Insured to properly notify Certificate Holders shall impose no obligation or liability upon the Company.

In the event of cancellation of coverage for the Certificate Holders by the Company for any of the reasons specified in the Transportation Network Company Commercial Auto Policy, Form Z947 NY (04/20), the Company will provide notice to the first Named Insured and all Certificate Holders.

In the event of cancellation of coverage for the Certificate Holder(s) by the first Named Insured, the first Named Insured will provide notice to all the Certificate Holders.

Additional Coverages

Insurance coverage(s)	Limits	Deductible
Uninsured Motorist Bodily Injury	\$25,000 each person/\$50,000 each accident	
Mandatory Personal Injury Protection	Included as further described in the policy	
Aggregate No-Fault Benefits Available	Included as further described in the policy	

PROGRESSIVE
PO BOX 94739
CLEVELAND, OH 44101

Policy number: 01230832

Underwritten by:
United Financial Casualty Company
August 12, 2022
Policy Period: October 1, 2022 – October 1, 2023

Named insured
Lyft, Inc.
185 Berry St., Suite 5000
San Francisco, CA 94107

Commercial Auto Insurance Coverage Summary

This is your Renewal Declarations Page

Your coverage begins on October 1, 2022 at 12:01 a.m. Pacific time. This policy period ends on October 1, 2023 at 12:01 a.m. Pacific time.

Premium payment information:

Initial premium due and payable at inception of policy period: [REDACTED]

Estimated total premium: [REDACTED]

The estimated total premium is subject to change based on the monthly reports you provide to us. A separate invoice will issue to you each month with the amount of premium due and payable.

Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy contract is form Z947NY (04/20). The contract is modified by 8610TNCBK (07/19), 8610TNCDR (07/19), 8610TNCGE (07/19), Z904 (05/17), Z907TNCOTNY (07/19), Z907TNCPNOTNY (07/19), Z934TNCNNY (07/19), and Z935TNCNY (07/19).

The named insured organization type is a Corporation.

Outline of coverage

Your insurance policy and any policy endorsements contain a full explanation of your coverage.

Description	Limits	Deductible
Liability To Others		
Bodily Injury Liability	\$75,000 each person/\$150,000 each accident	
Property Damage Liability	\$25,000 each accident	
Uninsured Motorist Bodily Injury	\$25,000 each person/\$50,000 each accident	
Supplementary Uninsured/Underinsured Motorist	Rejected	
Mandatory Personal Injury Protection	\$50,000	
Death Benefit	\$2,000	

Maximum Monthly Work Loss	\$2,000
Other Reasonable and Necessary Expenses	\$25 each day
Aggregate No-Fault Benefits Available	\$50,000
Additional PIP-Out of State Guest	Rejected
Additional PIP-Full	Rejected
Optional Basic Economic Loss	Rejected

Additional Insured information

Additional Insured	Lyft, Inc. and its subsidiaries 185 Berry St., Suite 5000 San Francisco, CA 94107
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Company officers



Secretary

This policy is in compliance with the financial responsibility requirements of Vehicle and Traffic Law section 1693(2)(a) and regulations promulgated thereunder; but does not provide coverage as provided under Vehicle and Traffic Law section 1693(3)(a).