



# Member Certificate In Dues Liability Program

THIS CERTIFICATE IS ISSUED TO  
THE FOLLOWING INSURED MEMBER:

**Alicia Jablonski**

**Membership ID Number:** 51724

**Policy Number:** 3ED4167

**Second City Pet Care, Inc.**

3501 N Southport Ave Box 413

Chicago, IL 60657

(773) 279-9922

For association questions and/or  
questions about your insurance plan,  
please contact PSA headquarters at  
(715) 450-9513.

**Spouse:** N/A

**Partners:** Rhonda Radford

**Employees/IC:** (4)

**Pet Daycare & Boarding Locations:** Alicia  
Jablonski, 4625 N Karlov Ave

**Membership Effective:** 04/30/2023    **Membership Expires:** 04/30/2024

**Optional Coverage:** Broadened Property Damage Coverage & Bond, Pet Daycare & Boarding

## LIMITS OF INSURANCE BODILY INJURY OR PROPERTY DAMAGE:

\$1,000,000 Each Occurrence

\$2,000,000 General Aggregate

\$1,000,000 Personal and Advertising Injury

\$2,000,000 Products / Completed Operations Aggregate Limit

\$100,000 Damage to Premises Rented to You

\$15,000 Each Occurrence for loss of pets in your care, custody, or control

\$30,000 Annual Aggregate for loss of pets in your care, custody or control

\$1,000 Each Occurrence / \$5,000 Annual Aggregate Veterinarian Expense

\$10,000 Each Occurrence / \$25,000 Annual Aggregate for loss to personal property  
of your customers in your care, custody or control

\$2,000 Each Occurrence for Lost Key coverage for Re-keying of customer's homes

\$5,000 Medical Expense Limit

Administered by: RPS Eau Claire, Eau Claire, WI.

Underwritten by: Evanston Insurance Company

File a claim online or call:  
1-844-777-8323

**\$500 per occurrence deductible toward vet expense** for any claim arising out of the  
voluntary releasing of a pet in your care, custody or control from its leash, outside of the  
above ground fenced yard of the pet's owner's or pet sitter's residence (if the optional  
pet daycare & boarding coverage is purchased).

*Membership and corresponding insurance coverages are effective at the date and time of purchase or any other  
future date requested. If payment was made via check, coverage cannot be effective prior to the postmark date.  
View coverage forms at [petsitllc.com/members](https://petsitllc.com/members)*

Date: 11/11/2023

Authorized Representative:

*Colleen E. Gils-Harris*

