



ADDITIONAL REMARKS SCHEDULE

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

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 private passenger vehicles being used following the Named Operator's logged and recorded acceptance in the Uber application to transport passenger(s) while the Named Operator is i) en route to pick up that passenger or ii) is transporting that passenger to their destination.
 - c. Named Operators are insureds, and this coverage is excess of any other collectable insurance, but if no other coverage exists, this coverage will act as primary coverage
2. This is an evidence of coverage certificate