

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) XX/XX/XXXX

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 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).									
PROI	DUCER			CONTAC NAME:	СТ				
vvvv	xxxxxxxxxxxxxxxxxx			PHONE (A/C, No	PHONE FAX (A/C, No, Ext): (A/C, No):				
^^^				E-MAIL ADDRES	SS:				
					INSURER(S) AFFORDING COVERAGE				NAIC #
				INSURE	INSURER A: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
INSU	RED								
INSURER C: INSURER D: INSURER D:									
,,,,,		- I	\ /	INSURE	INSURER D:				
			V	INSURE	INSURER E :				
				INSURE	RF:				
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. INSP. POLICY FEE POLIC									
INSR LTR	TYPE OF INSURANCE	INSR		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	CY EFF POLICY EXP LIMITS			
Α	GENERAL LIABILITY	х		xxxxxxxxxxxxxxxxxxxxx	XX/XX/XX	XX/XX/XX	EACH OCCURRENCE	\$ 5	5,000,000
	V 00144500141 05145041 114011171					' '	DAMAGE TO RENTED	_	200.000

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
Α	GENERAL LIABILITY	х		xxxxxxxxxxxxxxxxxxxxxx	XX/XX/XX	XX/XX/XX	EACH OCCURRENCE \$ 5,000,000	
	X COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED \$ 300,000	
	CLAIMS-MADE X OCCUR						MED EXP (Any one person) \$ NONE	
							PERSONAL & ADV INJURY \$ 5,000,000	
							GENERAL AGGREGATE \$ NONE	
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$ 5,000,000	
	POLICY PRO- JECT LOC						\$	
Α	AUTOMOBILE LIABILITY			xxxxxxxxxxxxxxxxxxxxxx	XX/XX/XX	XX/XX/XX	COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000	
	X ANY AUTO				' '	, ,	BODILY INJURY (Per person) \$	
	ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident) \$	
	HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident) \$	
							\$	
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE \$	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE \$	
	DED RETENTION \$						\$	
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			xxxxxxxxxxxxxxxxxxxxxx	XX/XX/XX	XX/XX/XX	X TORY LIMITS - ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT \$ 5.000.000	
							E.L. DISEASE - EA EMPLOYEE \$ 5,000,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT \$ 5,000,000	
Α	Property			xxxxxxxxxxxxxxxxxx	XX/XX/XX	XX/XX/XX	Replacement Cost per Golf Cart	
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

As respects to golf carts and all other operations by the named insured, Speedway Globe, LLC; Atlanta Motor Speedway, LLC; Bristol Motor Speedway, LLC; Charlotte Motor Speedway, LLC; Dover Motor Speedway, LLC; Kentucky Raceway, LLC dba Kentucky Speedway; Nashville Speedway USA, Inc. dba Nashville Superspeedway; Nevada Speedway, LLC dba Las Vegas Motor Speedway; New Hampshire Motor Speedway, Inc.; North Wilkesboro Speedway, Inc.; Speedway Sonoma, LLC; Texas Motor Speedway, Inc.; Speedway Children's Charities; Speedway Motorsports, LLC, Circuit of the Americas, LLC and/or its subsidiaries and affiliates and their respective officers, managers, directors, employees, and agents related to the operations are added as Additional Insured to the General Liability on a Primary basis and Loss Payee to the Property policy. A Waiver of Subrogation is provided under all policies as required by written contract and as allowed by state law.

CERTIFICATE HOLDER	CANCELLATION
Speedway Globe, LLC 5239 zMax Blvd. Harrisburg, NC 28075	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

Insurance Requirements for Golf Cart Use Eligibility

Commercial General Liability including coverage for Bodily Injury, Property Damage, Personal and Advertising Injury, Products and Completed Operations, Contractual Liability and Mobile Equipment with a minimum limit of \$5,000,000 per occurrence and \$5,000,000 in the aggregate. If your personal equipment is street-legal, including auto liability insurance with limits of \$5 Million Dollars per occurrence. Coverage limits may be satisfied through a combination of primary, umbrella, or excess policies. Each liability policy shall name, add, or include as Additional Insured the following: Speedway GLOBE, LLC, d/b/a SMI Properties; Atlanta Motor Speedway, LLC; Bristol Motor Speedway, LLC; Charlotte Motor Speedway, LLC; Circuit of the Americas LLC; Dover Motorsports, LLC, Dover Motor Speedway, LLC, Nashville Speedway, USA, Inc. d/b/a Nashville Superspeedway, Nevada Speedway, LLC d/b/a Las Vegas Motor Speedway; New Hampshire Motor Speedway, Inc.; Speedway Sonoma, LLC; Texas Motor Speedway, LLC.; Speedway Motorsports, LLC, Sonic Financial Corporation, Speedway Children's Charities and/or its subsidiaries and affiliates and each of their shareholders, members, partners, officers, managers, directors, employees, and agents. All such policies shall contain a waiver of subrogation endorsement waiving all rights of recovery against SMI Properties, its parent companies, subsidiaries, related and affiliated companies of each and the officers, directors, agents, employees and assigns of each. All insurance policies required will be primary and non-contributory to any insurance or self- insurance of SMI Properties and any of its parent companies, their subsidiaries, related and affiliated companies. Upon execution of this Agreement and at any renewal thereafter, Company shall provide certificates of insurance to SMI Properties as evidence that policies specified in this section providing the required coverage, conditions, and limits are in full force and effect.