



CITY of NOVI CITY COUNCIL

**Agenda Item J
August 12, 2019**

SUBJECT: Approval of request for Fireworks Display Permit by Michigan State Fair, LLC to be operated by Wolverine Fireworks Display, on Thursday, August 29, 2019 for the Michigan State Fair event.

SUBMITTING DEPARTMENT: City Clerk

CITY MANAGER APPROVAL:

BACKGROUND INFORMATION:

Michigan State Fair, LLC would like to enhance their annual event with the addition of a fireworks display on Thursday, August 29, 2019.

The show will be launched from the western side of the Suburban Collection Showplace grounds, and will be conducted by Wolverine Fireworks Display.

The Michigan Fireworks Safety Act requires the applicant to furnish adequate insurance coverage with the Fireworks Permit Application. The Certificate of Liability Insurance is acceptable and provides an endorsement listing the City of Novi as an Additional Insured.

The Novi Fire Department has conducted a site inspection and an additional inspection will occur once the show is complete. Additional Police and Fire Department personnel will be assigned for the duration of the event to assure that all safety measures and processes are adhered to according to the fireworks permit.

RECOMMENDED ACTION: Approval of request for Fireworks Display Permit by Michigan State Fair, LLC to be operated by Wolverine Fireworks Display, on Thursday, August 29, 2019 for the Michigan State Fair event.

Application for Fireworks Other Than Consumer or Low Impact

FOR USE BY LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD ONLY

DATE PERMIT(S) EXPIRE:

Authority: 2011 PA 266
 Compliance: Voluntary
 Penalty: Permit will not be issued

The LEGISLATIVE BODY OF CITY, VILLAGE OR TOWNSHIP BOARD will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this Legislative Body of City, Village or Township Board.

TYPE OF PERMIT(S) (Select all applicable boxes)

<input type="checkbox"/> Agricultural or Wildlife Fireworks	<input type="checkbox"/> Articles Pyrotechnic	<input checked="" type="checkbox"/> Display Fireworks
<input type="checkbox"/> Public Display	<input checked="" type="checkbox"/> Private Display	
<input type="checkbox"/> Special Effects Manufactured for Outdoor Pest Control or Agricultural Purposes		

NAME OF APPLICANT Wolverine Fireworks Display, Inc.	ADDRESS OF APPLICANT 205 W. Seidlers Rd., Kawkawlin, MI 48634	AGE (18 YEARS OR OLDER) OF APPLICANT N/A
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NAME OF PERSON OR RESIDENT AGENT REPRESENTING CORPORATION, LLC, DBA OR OTHER Jennifer Campau	ADDRESS PERSON OR RESIDENT AGENT REPRESENTING CORPORATION, LLC, DBA OR OTHER Same
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IF A NON-RESIDENT APPLICANT (LIST NAME OF MICHIGAN ATTORNEY OR MICHIGAN RESIDENT AGENT)	ADDRESS (MICHIGAN ATTORNEY OR MICHIGAN RESIDENT AGENT)	TELEPHONE NUMBER 989-662-0121
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NAME OF PYROTECHNIC OPERATOR Ronald Walker	ADDRESS OF PYROTECHNIC OPERATOR 5191 E. Atherton, Burton, MI	AGE (18 YEARS OR OLDER) OF PYROTECHNIC OPERATOR 21+
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NO. YEARS EXPERIENCE 20+	NO. DISPLAYS 250+	WHERE Throughout MI (Including Genesee, Flint, Jackson, Burton, Great Lakes Loons, Frankenmuth, etc...)
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NAME OF ASSISTANT Dave Loesel	ADDRESS OF ASSISTANT PO Box 225, Saline, MI 48176	AGE OF ASSISTANT (18 YEARS OR OLDER) 18+
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NAME OF OTHER ASSISTANT Kenneth Malinowski	ADDRESS OF OTHER ASSISTANT 7655 Robinson, Allen Park, MI 48101	AGE OF OTHER ASSISTANT (18 YEARS OR OLDER) 18+
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EXACT LOCATION OF PROPOSED DISPLAY
27780 Beck Rd., Novi, MI 48377

DATE OF PROPOSED DISPLAY August 29, 2019	TIME OF PROPOSED DISPLAY Dusk
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MANNER AND PLACE OF STORAGE, SUBJECT TO APPROVAL OF LOCAL FIRE AUTHORITIES, IN ACCORDANCE WITH NFPA 1123, 1124 & 1126 AND OTHER STATE OR FEDERAL REGULATIONS. PROVIDE PROOF OF PROPER LICENSING OR PERMITTING BY STATE OR FEDERAL GOVERNMENT

No storage necessary. Fireworks will arrive day of display.

AMOUNT OF BOND OR INSURANCE (TO BE SET BY LOCAL GOVERNMENT) \$10,000,000	NAME OF BONDING CORPORATION OR INSURANCE COMPANY The Partners Group Ltd.
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ADDRESS OF BONDING CORPORATION OR INSURANCE COMPANY
11225 SE 6th St. Suite 110, Bellevue, WA 98004

NUMBER OF FIREWORKS	KIND OF FIREWORKS TO BE DISPLAYED (Please provide additional pages as needed)
	1.3G Aerial Shells, UN 0334, Nothing Larger than 3" diameter
	*Amounts per size TBD based on budget
	SEE ATTACHED Proposal with shell count

SIGNATURE OF APPLICANT <i>Jennifer Campau</i>	DATE July 12, 2019
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August 7, 2019

TO: Cortney Hanson, Novi City Clerk

FROM: Kevin S. Pierce, Fire Marshal

CITY COUNCIL

Mayor
Bob Gatt

Mayor Pro Tem
Dave Staudt

Andrew Mutch

Laura Marie Casey

Kelly Breen

Ramesh Verma

Doreen Poupard

City Manager
Peter E. Auger

Director of Public Safety
Chief of Police
David E. Molloy

Director of EMS/Fire Operations
Jeffery R. Johnson

Assistant Chief of Police
Erick W. Zinser

Assistant Chief of Police
Scott R. Baetens

RE: Application for Fireworks Display Permit, Michigan State Fair, on the grounds of Suburban Collections Showplace, 46100 Grand River August 29, 2019.

The permit application to conduct a fireworks display has been reviewed for compliance with the following laws and codes:

2012 International Fire Code (City adopted Fire Prevention code)
P.A. 328 of 1931 as Amended, State of Michigan Fireworks Law
NFPA 1123, Code for Fireworks Display

The above application is **Recommended for APPROVAL**

1. Vendor for the display is Wolverine Fireworks Display
2. Absolutely **NO SMOKING** or use of open flame in safety zone.
3. All unauthorized personnel and the general public will be kept away from the fireworks firing area and the safe zone before, during and after the display. The safety zone for this event has to be a minimum of 420' in diameter, and the launch pad **MUST** be in the middle of this area and is subject to change due to weather and crowd conditions.
4. The storage method and location of the fireworks prior to the show shall be provided and shall be in compliance with NFPA 1123. At **NO** time shall the storage of the fireworks be left unattended.
5. The firing method of the pyrotechnics devices shall be electronic means **ONLY**.
6. It shall be the responsibility of Wolverine Fireworks Display to inspect the fallout area immediately after the show as well as the following morning (August 30, 2019) for any hazardous debris or unexploded shells.
7. The installation of the motor tubes and the racks or other launch devices shall be inspected prior to the loading of any pyrotechnic device by a fire department representative.

Novi Public Safety Administration
45125 Ten Mile Road
Novi, Michigan 48375
248.348.7100
248.347.0590 fax

cityofnovi.org

8. Prior to the date of the show, Suburban Collections Showplace **MUST** mow/brush hog the grass in the fallout zone. This will be inspected by the Fire Marshal and or his designee.

9. On the date of the show, Suburban Collections Showplace shall provide at least 3 security guards to guard the wooded area on the north side of Grand River so **NO** one enters the fallout zone. The security guards will be posted on the sidewalk starting 1 hour prior to the fireworks show. The security guards shall be in place until Wolverine Fireworks Display has conducted its first inspection of the fallout zone.

This fireworks show is proposed to have 3.0" shell as the largest shell to be shot off. This review and approval is based on this information and the submittal by Wolverine Fireworks Display. **AT NO TIME SHALL A SHELL LARGER THAN 3.0" BE USED IN THIS SHOW.**

It shall be noted, that whenever, in the opinion of the Fire Chief or his designee, any hazardous condition exists, the fireworks display shall be postponed until the condition is corrected. In addition, if high winds, precipitation, or other adverse weather condition prevail such that a significant hazard exists in the opinion of the Fire chief or his designee or the operator, the fireworks display shall be postponed until weather conditions improve to a reasonable level.

Sincerely

A handwritten signature in black ink, appearing to read 'K. Pierce', with a long horizontal flourish extending to the right.

Kevin S. Pierce-Fire Marshal
City of Novi Fire Department

cc. file

Instructions for Application for Fireworks Other Than Consumer or Low Impact

Applications shall be submitted to the legislative body of a city, village or township board. A permit may be issued as a result of official action by the legislative body. A permit shall be valid only for use within the limits of the jurisdiction of the legislative body of a city, village or township board.

1. Type of Permit – check all boxes that may apply to the type of permit needed. You may select several permit types depending on your fireworks display. You may check with your legislative body of a city, village or township board for assistance when making your selection. Please review the following definitions to determine which type of permit to select:
 - Agricultural or Wildlife Fireworks – devices distributed to farmers, ranchers, and growers through a wildlife management program administered by the US Department of Interior or Michigan DNR.
 - Articles Pyrotechnic – 1.4G fireworks for professional use only that is classified as UN0431 or UN0432.
 - Display Fireworks – 1.3G fireworks for professional use only
 - Special Effects Manufactured for Outdoor Pest Control or Agricultural Purposes – devices with a combination of chemical elements or compounds capable of burning independently of the oxygen of the atmosphere and designed and intended to produce an audible, visual, mechanical or thermal effect for pest or animal control.
 - Public Display – a fireworks display that is open to all persons for viewing.
 - Private Display – a fireworks display that is not open to the general public for viewing.
2. Name of applicant – list the name of the applicant. The applicant may be a person representing an organization, group, firm or corporation, or self. If the applicant is also the operator, enter the same name in the operator's section.
3. Address of applicant – complete the address of the applicant; include the street address, city, state and zip code.
4. Name of person or resident agent representing corporation, LLC, DBA or other – list the name of the person or resident agent that represents the corporation, LLC, DBA or other.
5. Address of person or resident agent that represents the corporation, LLC, DBA or other – list the address of the person or resident agent representing the corporation, LLC, DBA or other.
6. Non-resident applicant – list the name of the non-resident applicant. A non-resident applicant shall appoint a Michigan attorney or Michigan resident agent in writing to be the applicant's legal representative upon whom all service of process in any action or proceeding may be served.
7. Name of pyrotechnic operator – list the name of the pyrotechnic operator. The pyrotechnic operator is the person in charge of the display. The legislative body of a city, village or township board shall rule on the competency and qualifications of the operator before granting a permit and may require an affidavit from the applicant as to the operator's experience, former pyrotechnic accidents, criminal record, sobriety, etc.
8. Address of pyrotechnic operator – list the address of the pyrotechnic operator; include the street address, city, state and zip code.
9. Age of the pyrotechnic operator – list the age of the pyrotechnic operator; the operator must be 18 years of age or older.
10. Name of assistant – list the name of the assistant to the pyrotechnic operator;
11. Address of assistant – list the address of the assistant; include the street address, city, state and zip code. If there is more than one assistant, please list additional assistants on a separate sheet and include the address and age of those additional assistants.
12. Age of assistant – list the age of the assistant to the pyrotechnic operator; the assistant must be 18 years or older.
13. Name of other assistant – list the name of other assistant to the pyrotechnic operator.
14. Age of other assistant – list the age of the assistant to the pyrotechnic operator; the assistant must be 18 years or older.
15. Exact location of proposed display – list the address of the exact location of the proposed fireworks display.
16. Date of proposed display – indicate the date of the proposed fireworks display; only one display date can be used per application.
17. Time of proposed display – indicate the time of the proposed fireworks display.
18. Manner and place of storage - indicate the manner and place of storage within the legislative body of a city, village or township board of fireworks that are ready for display, just prior to the display in the area of exhibition. The legislative body of a city, village or township board shall obtain approval from the local fire authorities of the manner and place of storage before any permit is issued.



Wolverine FIREWORKS

205 West Seidlers Rd. • Kawkawlin, MI 48631
Phone: 989.662.0121 • Fax: 989.662.0122

Display, Inc.

— Visit us at www.wolverinefireworks.com —

Michigan State Fair

8/29/2019

\$10,000.00 Proposal

Includes Insurance & Labor

Opening

3	25 Shot	Red, White and Blue Peanut Salutes
72	3"	Titanium Salutes w/Tails

Main

3	100 Shot	Yellow Strobe Willow Waterfall
3	150 Shot	New Color Tail Stars
3	25 Shot	1.5" Double Break Shells
3	35 Shot	2.25" Peony & Chysanthemum w/Crackling
180	3"	T-Sky Assorted Shells

Mid Show Finale

3	100 Shot	Wave Willow
144	3"	Brocade Crown Shells Chained 12/1

Finale

144	3"	Dark Salutes Chained 12/1
72	3"	White Strobing Willows Chained 12/1



Wolverine FIREWORKS

205 West Seidlers Rd. • Kawkawlin, MI 48631
Phone: 989.662.0121 • Fax: 989.662.0122

Display, Inc.

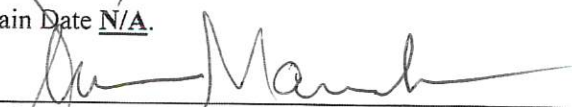
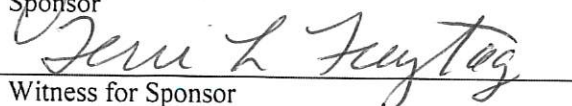


Visit us at www.wolverinefireworks.com

Contract Agreement

This Contract will engage the services of Wolverine Fireworks Display Inc. as vendor and display operator. This agreement, between **Michigan State Fair, LLC** Hereinafter called "Sponsor" and Wolverine Fireworks Display Inc., 205 W. Seidlers Rd., Kawkawlin, Michigan, Hereinafter called "Professionals", is as follows.

The Sponsor and Professional, for mutual consideration hereinafter set forth, agree as follows:

- A: Professional agrees to provide Sponsor with correct amount, size and description of Fireworks as specified In proposal #1 submitted to Sponsor 7/19.
- B: Professional will provide Sponsor with Labor for the August 29, 2019 Fireworks Display at 27780 Beck Rd., Novi, MI 48377.
- C: Professional agrees to provide Sponsor with Liability Insurance in the amount of \$10,000,000.00, and Sponsor will be named as additional insured on that policy.
- D: Professional agrees that in case of inclement weather on the show date, that Sponsor will be charged fixed costs in the amount of \$2,500.00 per day and not for the unused Fireworks Package.
- E: Sponsor agrees to pay Professional a deposit of \$2,500.00 by 8/15/19.
- F: Sponsor agrees to pay balance of \$7,500.00 (plus applicable sales tax) within 10 days after show date of August 29, 2019.
- G: Sponsor agrees to indemnify, hold harmless, and defend Professional from and against any and all suits, claims, damages, liabilities, losses, expenses, and costs, including attorney fees (collectively "loss"), except to the extent such loss was caused by Professional's sole negligence.
- H: Sponsor agrees to procure and furnish a suitable place to display the fireworks in accordance with the NFPA 1123, and to secure all police, fire, and local and state permits, to arrange for any security bonds as required by law and to furnish all necessary and proper police and fire protection for the protection of Sponsor, the public, individuals who work in or around the display, for proper crowd control, vehicle parking and proper supervision. Sponsor further agrees to provide all necessary and proper discharge site security.
- I: Rain Date N/A.

	<u>7/16/19</u>
Sponsor	Date
	<u>7/16/19</u>
Witness for Sponsor	Date
	<u>7/16/19</u>
Professional	Date
	<u>7-16-19</u>
Witness for Professional	Date



Fireworks
Parameter
Safety
Team



Fireworks
Parameter Safety Team



Fireworks Parameter Safety Team





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/16/2019

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).

PRODUCER The Partners Group Ltd 11225 SE 6th St., Suite 110 Bellevue WA 98004	CONTACT NAME: Janet Nau	
	PHONE (A/C, No, Ext): 425-455-5640	FAX (A/C, No): 425-455-6727
E-MAIL ADDRESS: jnau@lpgrp.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Everest Indemnity Insurance Co		10851
INSURER B: Maxum Indemnity Company		26743
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSURED 14347 Wolverine Fireworks Display, Inc. 205 West Seidlers Road Kawkawlin MI 48631

COVERAGES

CERTIFICATE NUMBER: 1268889878

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 SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> \$2,000 Deductible GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	Y	S18ML01687191	2/1/2019	2/1/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$	
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	
B	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0		EXC603413501	2/1/2019	2/1/2020	EACH OCCURRENCE \$ 9,000,000 AGGREGATE \$ 9,000,000 \$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A			<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	

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

The following are Additional Insured on General Liability as their interest may appear as respects to operations performed by or on behalf of the Named Insured, as required by written contract.
 Michigan State Fair, LLC, City of Novi, BoCo Enterprises, TBON, LLC, Epoch Events, The Packard Co., Suburban Collection, its agents and its employees, WixMix LLC, Novi Mile, Servman LLC, sponsors and participants, Ram Trucks and Tractor Supply CO.
 Date of Event: August 29, 2019
 Location of Event: 27780 Beck Rd., Novi, MI 48377

CERTIFICATE HOLDER**CANCELLATION**

Michigan State Fair, LLC 46100 Grand River Ave. Novi MI 48374	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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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – DESIGNATED
PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
<p>Michigan State Fair, LLC, City of Novi, BoCo Enterprises, TBON, LLC, Epoch Events, The Packard Co., Suburban Collection, its agents and its employees, WixMix LLC, Novi Mile, Servman LLC, sponsors and participants, Ram Trucks and Tractor Supply CO. Date of Event: August 29, 2019 Location of Event: 27780 Beck Rd., Novi, MI 48377</p>
<p>Information required to complete this Schedule, if not shown above, will be shown in the Declarations.</p>

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" but only to the extent caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

B. The insurance afforded to an additional insured shall only include the insurance required by the terms of the written agreement and shall not be broader than the coverage provided within the terms of the Coverage Part.

C. The Limits of Insurance afforded to an additional insured shall be the lesser of the following:

1. The Limits of Insurance required by the written agreement between the parties; or
2. The Limits of Insurance provided by this Coverage Part.

D. With respect to the insurance afforded to an additional insured, the following additional exclusion applies:

This insurance does not apply to "bodily injury", "property damage" or "personal and advertising injury" arising out of any act or omission of an additional insured or any of its employees.



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

NOTICE OF CANCELLATION BY US TO THIRD PARTY ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

Schedule

30 days before the effective date of cancellation by us we will mail or deliver notice to:

Name: CITY OF NOVI
Address: 45175 TEN MILE ROAD
NOVI, MI 48375

The following condition is added to the policy:

Notice of Cancellation by Us to Third Party

1. If we cancel this policy for any reason other than non-payment of premium, notice of cancellation of not less than the number of days shown in the Schedule will be mailed or delivered to the third party identified in the Schedule.
2. We will mail or deliver our notice to the third party at the address shown in the Schedule.
3. If notice is mailed, proof of mailing will be sufficient proof of notice.
4. We will not notify the third party if cancellation is at your request.
5. We will not notify the third party in the event of non-renewal.
6. Our failure to notify the third party does not invalidate cancellation as respects you.