

CERTIFICATE OF LIABILITY INSURANCE

3/28/2024

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						CONTACT NAME: Debbie Williams				
HUB International Insurance Services Inc. PO Box 255387					PHONE (A/C, No, Ext): 916-480-4124					
Sacramento CA 95865					E-MAIL ADDRESS: debbie.williams@hubinternational.com					
					INSURER(S) AFFORDING COVERAGE				NAIC #	
License# 0757776					INSURER A: Nautilus Insurance Company				17370	
	INSURED SWMAINT-01					INSURER B: Key Risk Insurance Company				
SW	SW Maintenance Corp 3116 Hwy 97					INSURER c : Service American Indemnity Company				
Weed CA 96094					INSURER D:				39152	
,					INSURER E :					
					-					
COVERAGES CERTIFICATE NUMBER: 963137003							REVISION NUMBER:			
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED 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		DELINI	POLICY EFF	POLICY EXP	Lineiro		
Α	X COMMERCIAL GENERAL LIABILITY	INSD	WVD	ECP203984711		(MM/DD/YYYY) 4/1/2024	(MM/DD/YYYY) 4/1/2025	LIMITS	4.000.000	
	CLAIMS-MADE X OCCUR			201 2003047 11		4/1/2024	4/1/2023	EACH OCCURRENCE DAMAGE TO RENTED	1,000,000	
	X BOOKOORAJOOKK							(======================================	100,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:								5,000	
									1,000,000	
									2,000,000	
	OTHER:								2,000,000	
В	AUTOMOBILE LIABILITY	1		BAP203984811		4/4/2024	41410005	COMBINED SINGLE LIMIT &		
	X ANY AUTO			DAI 200304011		4/1/2024	4/1/2025	(Ea accident)	1,000,000	
	OWNED SCHEDULED AUTOS ONLY AUTOS NLY NON-OWNED							BODILY INJURY (Per person) \$		
								BODILY INJURY (Per accident) \$ PROPERTY DAMAGE		
	AUTOS ONLY AUTOS ONLY							(Per accident)		
Α	UMBRELLA LIAB X OCCUR	+-+		EEV202024044		4/1/2024	4/1/2025	\$		
	V EXCERCITED			FFX203984911				EACH OCCURRENCE \$	1,000,000	
	CLAIMS-IMADE	-						AGGREGATE \$	1,000,000	
С.	DED RETENTION \$ WORKERS COMPENSATION	+		SAMTWC1035500		4/4/0004	11110005	\$ OTH-		
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE			SAMITAACTOSSSOO		4/1/2024	4/1/2025	X PER OTH- STATUTE ER		
	OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT \$	1,000,000	
	If yes, describe under							E.L. DISEASE - EA EMPLOYEE \$	1,000,000	
A	DESCRIPTION OF OPERATIONS below Contractors Pollution Liability	-		FCD202004744		4/4/0004			1,000,000	
	Professional Liability			ECP203984711		4/1/2024	4/1/2025	Prof Liab Limit	\$1,000,000 \$1,000,000 \$5,000 each	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) RE: Evidence of Insurance Only.										
CFF	CERTIFICATE HOLDER CANCELLATION									
<u> </u>	THIORIE HOLDEN				CANC	ELLATION				
PROOF OF INSURANCE						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
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