## **Harco National Insurance Company Certificate of Insurance**

THIS IS TO CERTIFY TO:

Okaloosa County Board of County Commissioners Destin-Fort Walton Beach Airport Administration

1701 State Rd 85

North Eglin AFB, FL 32542

THAT THE FOLLOWING POLICY OF INSURANCE HAS BEEN ISSUED TO:

Elite Air, LLC c/o Shelby Smith 3914 Stadium Blvd Jonesboro, AR 72404

AIRCRAFT POLICY NO.

AVC100293-01

POLICY PERIOD:

FROM

09/27/2022

TO

09/27/2023

INSURANCE COMPANY: Harco National Insurance Company

LIABILITY COVERAGES			LIMITS OF LIABILITY						
			EACH PE	RSON		EACH <b>OC</b>	CURRENCE		
Bodily Injury Ex	cluding <b>Passengers</b>		\$ X	XX	\$				
Property Dama	ge		\$		\$		XXX		
Passenger Bodi	ly Injury		\$		\$		XXX		
Single Limit Incl	uding <b>Passengers</b> ,		\$ ·	\$ 1,000,000.					
with Passenger	Liability Limited to		\$ 100,000.		\$				
PHYSICAL DAMAGE COVERAGES:					DEDUCTIBLES				
REGISTRATION NUMBER	MAKE AND MODEL	Year	Insured Value	PHYSICAL DAMAGE COV.	NOT IN		IN-MOTION INGESTION MOORING		
N270EA	Embraer Phenom 100	2012	\$2,500,000	F		\$10,000	\$25,000		

## **PHYSICAL DAMAGE** Coverage Identified

F. All Risk

G. Not in Motion

OTHER COVERAGES/CONDITIONS/REMARKS: The Certificate Holder is included as an additional insured but only as respects operations of the Named Insured. The insurance extended by the policy shall not apply to, and the Certificate Holder shall not be insured for bodily injury or property damage which arises from the design, manufacture, modification, repair, sale, or servicing of products by the Certificate Holder.

A Certificate of Insurance is issued as a matter of information only and confers no rights upon the certificate holder. A Certificate of Insurance does not amend, extend, or alter the coverage, terms, exclusions, conditions, or other provisions afforded by the policies referenced therein.

If the policy referenced above is cancelled before the expiration date, notice of cancellation shall be provided to the certificate holder if such notice of cancellation has been included within this policy and/or endorsements attached thereto.

Certificate Number

Ву

Date of Issue:

AVA 01 21 02 18

09/27/2022

(Authorized Representative)

CONTRACT#: L08-0343-AP

SHELBY SMITH

DAP BLOCK 9/LOTS 3 &4

**EXPIRES: 09/30/2037** 

Page 1 of 1



## **EVIDENCE OF COMMERCIAL PROPERTY INSURANCE**

DATE (MM/DONYYY) 11/28/2022

THIS EVIDENCE OF COMMERCIAL PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE	OP	PR	OD	UCER, AND THE ADDITIONAL INTEREST.				
PRODUCER HAME. CONTACT PERSON AND ADDRESS (ACC. 1911, East), 850-244-2111				COMPANY HAME AHO ADDRESS	NAIC NO: 35378			
Harris Insurance Services, Inc.				Evanston Insurance Company	and the second s			
123 Mirade Strip Pkwy Se				• •				
Fort Walton Beach, FL 32548								
101,770,001,002,001,00								
FAX Hoj: 850-243-5265 EMAL Service@harrisinsurance.co	om.	•		# MULTIPLE COMPANIES, COMPLETE SEPAR	ATE FORM FOR EACH			
				POLICY TYPE				
AGBACY				Commercial Property				
CUSTOMERID #: HAMED INSURED AND ADDRESS	•			. I can a commentation of the contract of the	Y HUMBER			
<b>*</b>				244	373540			
Shelby Smith				REFECTIVE DATE EXPRATION DATE	And the second s			
3914 Stadium Blvd				11/21/2022 11/21/2023	TERMINATED IF CHECKED			
JONESDOTO, AR 72404 ACIDITIONAL NAMED RIBURED(S)				THE REPLACES PRIOR EVIDENCE DATED:				
BELLI CHARL IDEES MOON - (0)								
PROPERTY INFORMATION (Use REMARKS on page 2, If mo	Te (	Rn2/	a i	s required)	S PERSONAL PROPERTY			
LOCATION / DESCRIPTION		E			]			
1001 Airport Rd #20				Lease #L08-0343-AP				
Destin, FL 32541								
THE POLICING OF INSURANCE LISTED BELOW HAVE BEEN ISSUED ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR	OTI	THI	4I E	SURED NAMED ABOVE FOR THE POLICY PERIOD INT HAIGHT WITH DESPECT TO WHACH THIS EVIDENCE OF	)KATED. NOTWITHSTANDING			
RE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE	POL	ICIE:	s Di	ESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, E	EXCLUSIONS AND CONDITIONS			
OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY	PAI	O CL	ᆈ	8.				
COVERAGE INFORMATION PERILS INSUREO		SIC	_L,	BROAD X SPECIAL				
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$	600	<u> </u>	·	· · · · · · · · · · · · · · · · · · ·	D: 1,000			
	YES	KO	NIA					
BUSINESS INCOME RENTAL VALUE		X			Loss Sustained; # of months:			
BLANKET COVERAGE	rwa-r-rially			If YES, indicate value(s) reported on property identified et	xxv=: \$			
TERRORISM COVERAGE		X		Attach Discosure Notice / DEC				
IS THERE A TERROPISM-SPECIFIC EXCLUSION?								
IS DOMESTIC TERRORISM EXCLUDED?								
UMITEO FUNGUS COVERAGE		X	ļ	N YES, LIMIT:	OEO;			
FUNGUS EXCLUSION (If "YES", specify organization's form used)			<u> </u>					
REPLACEMENT COST	X	<u> </u>						
AGREED VALUE		X						
COINSURANCE	X		1	ITYES, 80 %	VALUE 10-10			
EQUIPMENT BREAKDOWN (II Applicable)		X		II YES, LIMIT:	DED:			
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bidg		X	<u> </u>	If YES. LIMIT:	DEO:			
- Demolition Costs		X	]	MYES, LIMIT:	DED:			
- Incr. Cost of Construction		X		I YES, LIMIT:	DEO:			
EARTH MOVEMENT (II Applicable)		X		IIYES, LIMT:	OED:			
FLOOD (If Applicable)		X		II YES, LIMIT:	DED:			
WINO / HAIL INCL YES INO Subject to Different Provisions:		X		II YES, LIMT:	DEO:			
NAMED STORM INCL  VES  540 Subject to Different Provisions:		X		ITYES, LIMIT:	OED;			
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS		×						
CANCELLATION								
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES EDUCATION OF THE ABOVE DESCRIBED POLICIES EDUCATION OF THE POLICY PROVISION	3E NS.	CAN	ŧCE	LLED BEFORE THE EXPIRATION DATE THE	REOF, NOTICE WILL BE			
ADDITIONAL INTEREST								
MORTGAGEE CONTRACT OF SALE	·			LENDER SERVICING AGENT HAME AND ADDRESS				
LENDERS LOSS PAYABLE X Additional Insured								
HAME AND ADDRESS				1				
Okatoosa County Board of County Commissioners								
C/O Destin- Fort Welton Beach Airport Administratio								
1701 State Road 85		AUTHORIZED REPERSENTATING						
North Egiln AFB, Florida 32542				1 1				
Traini will an a training description				1 212				