

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/29/2023

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:				
Ames & Gough 8300 Greensboro Drive Suite 980		PHONE: (A/C, No, Ext): (703) 827-2277 FAX (A/C, No): (703) 827-2279				
		E-MAIL ADDRESS: admin@amesgough.com				
McLean, VA 22102		INSURER(S) AFFORDING COVERAGE		NAIC#		
		INSURER A: Charter Oak Fire Insurance Company A++ (XV)		25615		
INSURED		INSURER B : Phoenix Insurance Company A-	25623			
Ardurra Group, Inc.	ау	INSURER C: Travelers Property Casualty Company of America		25674		
4921 Memorial High Suite 300		INSURER D : National Fire & Marine Insurance Company		20079		
Tampa, FL 33634		INSURER E : LLoyds of London/HCC (A-XV)				
		INSURER F:				
COVERAGES	CERTIFICATE NUMBER:	REVISION NUI	VIBER:			

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

C	ERTI XCL	FICATE MAY BE ISSUED OR MAY ISIONS AND CONDITIONS OF SUCH	PERT/ POLICI	AIN, IES.	THE INSURANCE AFFORDED BY LIMITS SHOWN MAY HAVE BEEN I	/ THE POLICE REDUCED BY	IES DESCRIB PAID CLAIMS.	ED HEREIN IS SUBJECT T	O ALL	THE TERMS,
INSR LTR			ADDL S			POLICY EFF	POLICY EXP	LIMIT	s	
Α	Х	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR			630-5X487435	1/1/2024	1/1/2025	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000
	Х	Contractual Liab.						MED EXP (Any one person)	\$	15,000
								PERSONAL & ADV INJURY	\$	1,000,000
	GEN	VL AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000
	Х	POLICY PRO-						PRODUCTS - COMP/OP AGG	\$	2,000,000
		OTHER:							\$	
В	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
1	Х	ANY AUTO			810-5X558309	1/1/2024	1/1/2025	BODILY INJURY (Per person)	\$	
		OWNED SCHEDULED AUTOS ONLY AUTOS						BODILY INJURY (Per accident)	\$	
		HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
									\$	
С	Х	UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$	15,000,000
		EXCESS LIAB CLAIMS-MADE	1 1		CUP-5X642114	1/1/2024	1/1/2025	AGGREGATE	\$	15,000,000
L		DED X RETENTION \$ 10,000							\$	
С	WOR	RKERS COMPENSATION EMPLOYERS' LIABILITY						X PER OTH-	_,	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE 1/ N	N/A		UB-5X489557	1/1/2024	1/1/2025	E.L. EACH ACCIDENT	\$	1,000,000
		idatory in NH)	"					E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	DÉS	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
D		fessional Liab.			42-EPP-306878-06	1/1/2024	1/1/2025	Per Claim/Aggregate		1,000,000
E	Cyt	oer Liability			ACS1078123	1/1/2024	1/1/2025	Aggregate		5,000,000
	<u></u>									

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: CONTRACT #C22-3255-WS

Pollution Liability coverage is provided and included within the Professional Liability policy noted above. It shares the limits of the Professional Liability policy.

Okaloosa County Board of County Commissioners is included as additional insured with respect to General Liability, Automobile Liability, and Umbrella Liability when required by written contract. General Liability includes Additional Insured coverage for Completed Operations as required by written contract. General Liability, Automobile Liability, and Umbrella Liability are primary and non-contributory over any existing insurance and limited to liability arising out SEE ATTACHED ACORD 101

CERTIFICATE HOLDER	CONTRACT: C22-3255-WS	
Okaloosa County Board of County Commissioners 5479A Old Bethel Road Crestview, FL 32536	ARDURRA GROUP, INC. SUBSURFACE UTILITY ENG SVS FOR WATER AND SEWER EXPIRES: 09/30/2025 w/2 1 yr renewals	ORI

4400

LOC #: 2



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY Ames & Gough POLICY NUMBER SEE PAGE 1		NAMED INSURED Ardurra Group, Inc. 4921 Memorial Highway Suite 300 Tampa, FL 33634
CARRIER	NAIC CODE	
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1

SEE PAGE 1 ADDITIONAL REMARKS THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles:

of the operations of the named insured and when required by written contract. General Liability, Automobile Liability, Workers Compensation, and Umbrella Liability policies include a waiver of subrogation in favor of the additional insureds where permissible by state law and when required by written contract. Umbrella Liability coverage sits excess over General Liability, Automobile Liability and Employers' Liability coverage. 30-day Notice of Cancellation will be issued for the General Liability, Automobile Liability, Umbrella Liability, Workers Compensation and Professional Liability policies in accordance with policy terms and conditions.