

CERTIFICATE OF LIABILITY INSURANCE

JSCANLON

DATE (MM/DD/YYYY)

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GLAZCOM-01

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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.											
11	PORTANT: If the certificate holde SUBROGATION IS WAIVED, subjection is certificate does not confer rights t	ct to	the	terms and conditions of	the pol ich end	licy, certain p orsement(s).	olicies may	IAL INSURED provisior require an endorsemen	sorbe t.Ast	e endorsed. atement on	
	DUCER			NTACT Jennifer Scanlon							
M.E. Wilson dba Underwood Anderson insurance						PHONE FAX (A/C, No, Ext): (A/C, No);					
2302 North 9th Avenue – Pensacola, FL 32503						ss: jennifer@	Junderwoo	danderson.com			
· ····································					INSURER(S) AFFORDING COVERAGE					NAIC #	
						INSURER A : Southern Owners Insurance					
										32700	
						INSURER C: FCCI Insurance Company					
	1864 Cowen Rd		INSURER D :								
	Gulf Breeze, FL 32563				INSURER E :						
					INSURER F :						
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.											
			SUBR	POLICY NUMBER		POLICY EFF (MM/0D/YYYY)	POLICY EXP	LIMIT	S		
A	X COMMERCIAL GENERAL LIABILITY	1000				AND CR1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		EACH OCCURRENCE	\$	1,000,000	
	CLAIMS-MADE X OCCUR	x	x	78891193		2/12/2022	2/12/2023	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000	
	XEPL	^	^					MED EXP (Any one person)	\$	10,000	
	<u>^</u>							PERSONAL & ADV INJURY	s	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:		ļ					GENERAL AGGREGATE	s	2,000,000	
								PRODUCTS - COMP/OP AGG		2,000,000	
								HIRED NON OWNED	s	1,000,000	
В	OTHER:	x					2/12/2023	COMBINED SINGLE LIMIT (Ea accident)	5	1,000,000	
-	X ANY AUTO		x	4289119304		2/12/2022		BODILY INJURY (Per person)	\$		
	OWNED AUTOS ONLY SCHEDULED							BODILY INJURY (Per accident)	ŝ		
	HIRED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	AUTOS ONLY AUTOS ONLY								\$		
Α	X UMBRELLA LIAB X OCCUR							EACH OCCURRENCE	\$	3,000,000	
	EXCESS LIAB CLAIMS-MADE			4289119305		2/12/2022	2/12/2023	AGGREGATE	\$		
	DED X RETENTIONS 10,000							Employ Liab agg	\$	3,000,000	
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER			
	AND EMPLOYERS' LIABLITY		X	WC010007444400		12/26/2021	12/26/2022	E.L. EACH ACCIDENT	\$	1,000,000	
	ANY PROPRIETOR/PARTNER/EXECUTIVE N OFFICER/MEMBER EXCLUDED?	NIA						E.L. DISEASE - EA EMPLOYER	\$	1,000,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
		1		Í							
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC Jobs per network cabling & repair cont	LES (ACOR) 101, Additional Remarks Schedi	ule, ma	CONTEN		110 0/co IT			
RE:	Jobs per network cabling & repair cont	ract.						218-2658-IT			
Bla	ket Additional Insured if required by w	ritten	cont	ract with regard to Genera	d Liat	GLAZE	E COMM	UNICATION SEF	(VIC)	ES, INC.	
Subrogation applies to General Liability, Auto Liability and Workers Compensation i							M NETWORK CABLING & REPAIRS				
EXPIRES: 01/31 /2023											
CF	RTIFICATE HOLDER		CELLATION								
						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE					
	Okaloosa County BOCC	ACC	THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.								
302 N. Wilson Street, Suite 301											
Crestview, FL 32536						AUTHORIZED REPRESENTATIVE					
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