

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/19/2022

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(les) 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).

DDODI/GED						CONTACT Angela L. Barnette					
PRODUCER						I NAGE.					
Insurance Solutions Group						(A/C, No, Ext): (A/C, No): (CCT) CCC 2-TCT					
1332 S Brundidge St						E-MAIL ADDRESS: abarnette@InsuranceSolutionsGroup.com					
PO Box 1329					INSURER(S) AFFORDING COVERAGE  INSURER A. Associated Industries Insurance Company				NAIC# 23140		
Troy AL 36081						Ctate Auto Mutual					
INSURED						(MOUNTER D.)				25135	
JNB Services, LLC, DBA: JNB Services						INSURER C: Safety National Casualty Corp					
JNB Contracting, LLC					INSURER D:						
PO Box 104					INSURER E:						
Kinston AL 36453				INSURER F:							
COVERAGES CERTIFIC			ATE I	NUMBER: 2022-2023	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	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMITS		
	A COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE COCUR  CLAIMS-MADE COCUR							EACH OCCURRENCE	1.00	0,000	
А								DAMAGE TO RENTED PREMISES (Ea occurrence)	100	,000	
						10/10/2022		MED EXP (Any one per	5.00	00	
				AES120971400			10/10/2023	PERSONAL & ADV INJI	IURY \$ 1,00	0,000	
								GENERAL AGGREGAT	s 2,00	00,000	
1								PRODUCTS - COMP/O	2.00	00,000	
	OTHER:								\$		
	AUTOMOBILE LIABILITY			,,.				COMBINED SINGLE LII (Ea accident)	MIT \$ 1,00	0,000	
В	ANY AUTO OWNED AUTOS ONLY HIRED NON-OWNED			10058567CA			02/04/2023	BODILY INJURY (Per pe	erson) \$		
						02/04/2022		BODILY INJURY (Per ac	iccident) \$		
								PROPERTY DAMAGE	\$		
	AUTOS ONLY AUTOS ONLY							(Per accident) Medical payments	\$ 5,00	10	
<b> </b> -	✓ UMBRELLA LIAB OCCUR								1.00	0,000	
Α	EXCESS LIAB CLAIMS MADE			EXA121388600		10/10/2022	10/10/2023	AGGREGATE \$ 1,000		,,,,,,,	
								AGGREGATE			
	WORKERS COMPENSATION	<del> </del>					***************************************	➤ PER STATUTE	OTH- ER	-	
	AND EMPLOYERS' LIABILITY Y/N								1.00	0,000	
С	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A	Y PRP4063186	PRP4063186		01/01/2022	01/01/2023	E.L. EACH ACCIDENT	100	0,000	
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMI	400		
	DÉSCRIPTION OF OPERATIONS below	************						E.L. DISEASE - POLICY	YLIMIT   \$ 1,00		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)											
Exc	uded officers: Jessica Romero, Jorge DeJes	sus, a	nd Wi	illiam Travis Holley		the favorities a	laine of the init	used individuals being	war tha		
By waiving subrogation, the employer and servicing agent may still receive reimbursement from the lawsuit or claim of the injured individual; however, the employer and servicing agent may not file a claim or lawsuit againt the Okaloosa County Board of County Commissioners.											
CONTRACT C22-3191-PW											
JNB CONTRACTING, INC.											
LAKE LORRAINE PHASE 11 PROJECT									ECT		
				EXPIRES: 180 DAYS FROM NTP							
CERTIFICATE HOLDER CANCELLATION											
						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN					
Okalcosa County Board of County Commissioners						ACCORDANCE WITH THE POLICY PROVISIONS.					
5479A Old Brethel Road											
047 M Old Dietile) Noad						AUTHORIZED REPRESENTATIVE					

Crestview

FL 32536