

## **TBENNETT**



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/19/2022

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(ies) must have ADDITIONAL INSURED provisions or be endorsed.

	SUBROGATION IS WAIVED, subjents certificate does not confer rights t							require an endorsemen	τ. AS	tatement on						
PRODUCER Brunswick Insurance Agency, Inc. 5309 Transportation Blvd Cleveland, OH 44125						CONTACT Teresa Bennett NAME: PHONE (A/C, No, Ext):  E-MAIL ADDRESS: tbennett@brunswickcompanies.com										
												INSURER(S) AFFORDING COVERAGE NAIC #				
						INSURED  Xtreme Auto Recovery, Inc. 17 Frederick St.						INSURER B:				LLLJL
INSURER C:																
Constantia, NY 13044					INSURER E :											
					INSURER F:				+							
	VERAGES CER	TIEI	^ A TE	E NUMBER:	INSUKL	жг.		REVISION NUMBER:								
T IN C	HIS IS TO CERTIFY THAT THE POLICIINDICATED. NOTWITHSTANDING ANY RETIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	ES O REQUI PER	F INS IREMI TAIN,	SURANCE LISTED BELOW ENT, TERM OR CONDITIO THE INSURANCE AFFOR	N OF A	NY CONTRA 7 THE POLIC	CT OR OTHEI	RED NAMED ABOVE FOR T R DOCUMENT WITH RESPE BED HEREIN IS SUBJECT T	CT TC	WHICH THIS						
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR WVD	POLICY NUMBER		POLICY EFF	POLICY EXP (MM/DD/YYYY)	LIMIT	s							
	COMMERCIAL GENERAL LIABILITY	INOD	1111			(MINI/DD/11111)	(MINDD/1111)	EACH OCCURRENCE	\$							
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$							
								MED EXP (Any one person)	\$							
								PERSONAL & ADV INJURY	\$							
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$							
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$							
	OTHER:								\$							
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$							
	ANY AUTO							BODILY INJURY (Per person)	\$							
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per accident)	\$							
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$							
									\$							
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$							
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$							
	DED RETENTION\$								\$							
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER								
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$							
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYEE	\$							
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$							
Α	Fidelity / Crime			1062323		3/31/2022	3/31/2023	Client Property		1,000,000						
\$100	CRIPTION OF OPERATIONS / LOCATIONS / VEHICE Fidelity / Crime Coverage Policy is wri 0,000 is held by Allied Finance Adjuster	LES (/tten f	ACORE or a 1 nferen	D 101, Additional Remarks Schedu Fhree Year Term, billed on nce, Inc. as applicable laws	s will al	e attached if mor ual basis unt low.	re space is requi il renewed or	red) cancelled prior. The reter	ntion /	deductible of						
For Informational Purposes Only						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.										
					AUTHO	RIZED REPRESE	NTATIVE									