

**TBENNETT** 

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 2/6/2023

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.

	SUBROGATION IS WAIVED, subjet is certificate does not confer rights to							require an endor	sement	. Ast	atement on	
PRODUCER Brunswick Insurance Agency, Inc. 5309 Transportation Blvd						CONTACT NAME:						
						PHONE (A/C, No, Ext): (330) 864-8800 FAX (A/C, No): (330)					364-8661	
	eland, OH 44125				E-MAIL ADDRESS:							
						INS	SURER(S) AFFOI	RDING COVERAGE			NAIC#	
						INSURER A: Hanover Insurance Companies					22292	
INSURED  A&A Towing & Recovery 14165 S. Ave. E - Suite D Yuma, AZ 85365						INSURER B:						
						INSURER C:						
						INSURER D:						
						INSURER E:						
						RF:						
CO	VERAGES CER	TIFIC	CATE	E NUMBER:				REVISION NUME	BER:			
IN Cl	IIS IS TO CERTIFY THAT THE POLICI DICATED. NOTWITHSTANDING ANY F ERTIFICATE MAY BE ISSUED OR MAY (CLUSIONS AND CONDITIONS OF SUCH	REQUI PER	IREMI TAIN,	ENT, TERM OR CONDITION, THE INSURANCE AFFOR	N OF A DED BY	NY CONTRAC THE POLIC	CT OR OTHEFIES DESCRIB	R DOCUMENT WITH SED HEREIN IS SUE	RESPE	CT TO	WHICH THIS	
INSR LTR	NSR TYPE OF INCURANCE		SUBR WVD				POLICY EXP (MM/DD/YYYY)		LIMITS	3		
	COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE OCCUR		1112			(11111111111111111111111111111111111111	(MINIOD) 1111)	EACH OCCURRENCE		\$		
								DAMAGE TO RENTED PREMISES (Ea occurrence) \$				
								MED EXP (Any one pe		\$		
								PERSONAL & ADV IN		\$		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGA		\$		
	POLICY PRO- JECT LOC							PRODUCTS - COMP/O		\$		
	OTHER:									\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE L (Ea accident)	IMIT	\$		
	ANY AUTO							BODILY INJURY (Per	person)	\$		
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per a		\$		
	HIRED 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 STATUTE	OTH- ER			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		N/A						E.L. EACH ACCIDENT	-	\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE		\$		
	DESCRIPTION OF OPERATIONS below					0/0//0000	2/2//222/	E.L. DISEASE - POLIC	Y LIMIT	\$	4 000 000	
Α	Fidelity / Crime			BDW-1062158-02		3/31/2023	3/31/2024	Client Property			1,000,000	
	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC Fidelity / Crime coverage policy is writ 1000 is held by Allied Finance Adjusters						re space is requi renewed or c	red) ancelled prior. The	e retentio	on/dec	ductible of	
CFI	RTIFICATE HOLDER	CANCELLATION										
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.  AUTHORIZED REPRESENTATIVE						