

OP ID: 0002

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/23/2018

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.

If	SUE	BROGATION IS	W	AIVED, subject	to tl	he te	rms and conditions of the ificate holder in lieu of su	ne poli	cy, certain policy, contain policy (s)	olicies may).								
	DUCE					703	3-365-0362	CONTACT Beth Cummings										
Lighthouse Ins. Services LLC 9381 Forestwood Lane									o, Ext): 703-36	65-0362		FAX (A/C, No):	703-	880-7421				
Mar	nass	as, VA 20110						E-MAIL BCummings@Ihins.net										
Dar	a Lo	an							INS		NAIC #							
								INSURE	_{RA:} Plaza Ir	30945								
INSU	JRED	Northland Reco	ove	ry Bureau, Inc				INSURE	RB:									
		1800 Highway [,] Burnsville, MN						INSURE	RC:									
		,						INSURE	RD:									
								INSURE										
								INSURE	RF:									
CO	VER	AGES		CEF	RTIFI	CATI	ENUMBER:	REVISION NUMBER:										
IN C	IDICA ERTI XCLU	ATED. NOTWITI FICATE MAY BE	HST E IS:	ANDING ANY RI SUED OR MAY	EQUIF PERT POLI	REME AIN, CIES.	RANCE LISTED BELOW HA'NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF AN ED BY	Y CONTRACT THE POLICIE REDUCED BY	OR OTHER IS DESCRIBED PAID CLAIMS.	DOCUMENT WIT D HEREIN IS SU	H RESPE	CT TO	O WHICH THIS				
INSR LTR		TYPE OF IN			INSD	SUBR WVD	POLICY NUMBER		(MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMIT	s					
		COMMERCIAL GE									EACH OCCURREN		\$					
		CLAIMS-MAD	E	OCCUR							DAMAGE TO RENT PREMISES (Ea occ	ED urrence) \$						
											MED EXP (Any one	person)	\$					
											PERSONAL & ADV		\$					
	GEN	N'L AGGREGATE LIN									GENERAL AGGRE							
		POLICY PROJECT	ČT	LOC							PRODUCTS - COM	P/OP AGG						
Α	ALIT	OTHER: OMOBILE LIABILITY	,								COMBINED SINGL	E LIMIT	\$	1,000,000				
	AUI	ANY AUTO	ĭ				PRPSW010532-00		02/23/2018	02/23/2019	(Ea accident)		\$	1,000,000				
	OWNED AUTOS ONLY X SCHEDULED AUTOS						1 10 000 10002-00		02/20/2010	02/20/2013	` ' '							
	X	HIRED AUTOS ONLY	X	NON-OWNED AUTOS ONLY							PROPERTY DAMA (Per accident)		\$					
		AUTOS ONLY		AUTOS ONLY							(Per accident)		\$ \$					
		UMBRELLA LIAB	П	OCCUR							EACH OCCURREN	CF	\$					
		EXCESS LIAB		CLAIMS-MADE							AGGREGATE		\$					
		DED RETE	NTIC	ON \$									\$					
	WOF	RKERS COMPENSAT	TION II ITY	,							PER STATUTE	OTH- ER						
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under			N/A						E.L. EACH ACCIDE	DENT \$							
				117.2						E.L. DISEASE - EA EMPLOYEE		\$						
	DÉS	CRIPTION OF OPER		ONS below					20/20/20/		E.L. DISEASE - PO	LICY LIMIT	\$					
Α	Aut	o Physical Dan	n				PRPSW010532-00		02/23/2018	02/23/2019	_			2,000				
											Coll Ded			2,000				
		ON OF OPERATION			•		0 101, Additional Remarks Schedu	le, may b	e attached if mor	e space is requir	ed)							
Jet	, All	aciicu List Oi	JU	neduled Velli	CICS													
CE	RTIF	ICATE HOLDE	ER					CAN	CELLATION									
		For Infor	ma	tion Only			INFORMA	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								

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ACORD, VEHICLE SCHEDU											JLE												DATE 02/23/2018		
PRODUCER (A/C, No, Ext): 703-365-0362									APPLICANT (Firet																
Lighthouse Ins. Services LLC 9381 Forestwood Lane										(First Named Northland Recovery Bureau, Inc Insured)															
Man Dana		sas, VA	20	110						EF	FECTI	VE DATE	EXPIR	RATION	DATE		DIRECT	BILL		PA	YMENT PI	MENT PLAN AUDIT			
Dani	a L	Uali								FOR	02/2	3/18	02	2/23/1	9	X	AGENCY	BILL							
0005					0	D 00DE:				CON	(MPANY EONLY														
AGEN		CUSTOME	R ID		50	B CODE:				""															
NOF	RTH	1-4																							
VEHICLE DESCRIPTION																									
VEH# YEAR MAKE: Chev								BODY TYPE: WRECKER												CC	ST NEW				
1 2015 MODEL: K3500 CITY, STATE, Burnsville MN STATE LIC STATE TERR							\perp	V.I.N.:		KZC			29						\$						
GARA	HER	E DOOD	nsville MN 87									GVW/GCW		CL	ASS		SIC		TOR	SEAT (P RAD			THEST TERM	
DRIVE WOR	TO C/SC	HOOL	USE		X	COMM'L		CK ERAGES	AD FAI	D'L NO JLT)- X	UNDRINS MOTOR		F		LSP	DEDUCT		A	cv X	СОМР	SF		ISC R/CR:	
< 15 MILES			PLEASURE RETAIL X				LIAB NO-		D PAY INS	′	TOWING & LABOR SPEC		FT	_	COMP	AA	X	ST AN		000		-	OTAL PREM		
VEH		VEAR	FARM SERVICE X MAKE:				X	NO- FAULT	SPEC				FTW	X	COLL	\$		68,5	00 \$2,	OUU SYM/AG	COLL \$ AGE COST NEW		ST NEW		
			MODEL:								TYPE: V.I.N.:											\$	\$		
CITY, STATE, ZIP WHERE GARAGED								STATE	TERR			GVW/GCW		CL	ASS		SIC	FAC	TOR	SEAT (P RAD			THEST TERM	
DRIVE	E TO	HOOL	USE	<u> </u>		COMM'L	CHE	CK ERAGES	AD FAI	D'L NO	D-	UNDRINS MOTOR		F		LSP	DEDUCT	IBLES	A	cv	COMP	ŞI	PEC M OF L D	ISC R/CR:	
		MILES		PLEASURE		RETAIL		LIAB		D PAY	,	TOWING & LABOR		FT		СОМР	AA		ST AN	ит \$				OTAL PREM	
	15 N	/ILES +		FARM		SERVICE		NO- FAULT	UN MC	INS TOR		SPEC C OF L		FTW	(COLL	\$			\$		(COLL \$		
VEH	#	YEAR	MAI	MAKE:								BODY TYPE: SYM											CC	ST NEW	
			MODEL: LIC TERR						\perp	V.I.N.:	: GVW/GCW		CI	ASS		SIC	EAC	TOR	SEAT (P RAD	\$ \$		THEST TERM		
CITY, ZIP W GARA	HER	E					T	STATE							.A33				TOR	SEAT	, RAD				
DRIVE WOR	TO VSC	HOOL	USE	<u> </u>		COMM'L	COV	CK ERAGES	AD FAI	D'L NO JLT	D-	UNDRINS MOTOR		F	ı	LSP	DEDUCT	IBLES	A	cv	СОМР	SF C	OF L	ISC R/CR:	
		MILES		PLEASURE		RETAIL	\vdash	LIAB NO-		D PAY	/	& LABOR		FT		COMP	AA		STAN				-	OTAL PREM	
VEH		VEAR	FARM SERVICE				NO- UNIN FAULT MOTO			BODY									SYM/AG	_	COLL \$	ST NEW			
	-		MAKE: MODEL:								TYPE: V.I.N.:											\$			
CITY, STATE, ZIP WHERE GARAGED TERR									GVW/GCW		CL	ASS		SIC	FAC	TOR	SEAT (P RAD			THEST TERM				
DRIVE	то		USE			COMM'L	CHE	CK ERAGES	AD	D'L NO JLT	D-	UNDRINS MOTOR		F	ı	LSP	DEDUCT	IBLES	A	cv	COMP	SI	PEC M OF L D	ISC R/CR:	
	< 15 MILES			PLEASURE		RETAIL		LIAB	ME	D PAY		TOWING & LABOR		FT		COMP	AA		ST AN	ЛТ \$				OTAL PREM	
		/ILES +		FARM		SERVICE		NO- FAULT	UN MC	INS TOR	DODY	SPEC C OF L		FTW	(COLL	\$			\$		_	COLL \$		
VEH	#	YEAR	MAI								BODY TYPE	:									SYM/AG	E	ST NEW		
			MODEL:						TERR	-	V.I.N.:	: GVW/GCW	/GCW C				SIC	FΔC	CTOR SEAT CP		P RAD		FARTHEST TERM		
CITY, STATE, ZIP WHERE GARAGED DRIVE TO						CHE	STATE		D'L NO									ı	JOEAN C	, IGAS			ISC		
WÖR	<td>HOOL</td> <td>USE</td> <td></td> <td></td> <td>COMM'L</td> <td>čov</td> <td>ERAGES</td> <td>FAI</td> <td>JLT</td> <td></td> <td>UNDRINS MOTOR TOWING</td> <td></td> <td>F</td> <td></td> <td>LSP</td> <td>DEDUCT</td> <td>IDLES</td> <td></td> <td>cv</td> <td>COMP</td> <td>c</td> <td>OF L</td> <td>R/CR: OTAL PREM</td>	HOOL	USE			COMM'L	čov	ERAGES	FAI	JLT		UNDRINS MOTOR TOWING		F		LSP	DEDUCT	IDLES		cv	COMP	c	OF L	R/CR: OTAL PREM	
		MILES +		PLEASURE FARM	_	RETAIL	\vdash	NO-		D PAY INS TOR	´	& LABOR SPEC C OF L		FT FTW		COMP	\$ AA		STAN	ИТ \$ \$			COLL \$	OTAL TREM	
VEH		YEAR			TOR	BODY TYPE:					COLL	ĮΨ			ĮΨ	SYM/AG	_		ST NEW						
			MODEL:								V.I.N.:										\$;			
CITY, STATE, ZIP WHERE GARAGED					STATE TERR			GVW/GCW			CLASS			SIC	FAC	CTOR SEAT CP		P RAD	IUS	FAR	THEST TERM				
DRIVE	TO (/SC	HOOL	USE			COMM'L	CHE	CK ERAGES	AD FAI	D'L NO	D-	UNDRINS MOTOR		F	ı	LSP	DEDUCT	IBLES	A	cv	СОМР	SF	PEC M OF L D	ISC R/CR:	
	< 15	MILES		PLEASURE	=	RETAIL		LIAB	ME	D PAY	<i>,</i>	TOWING & LABOR		FT		COMP	AA		ST AN	ит \$				OTAL PREM	
		MILES +	FARM			SERVICE		NO- FAULT	UN MC	INS TOR	BODY	SPEC C OF L		FTW		COLL	\$			\$	0 1	_	COLL \$		
VEH#		YEAR	MAKE:								TYPE:						SYM/AG			ST NEW					
CITY, ZIP W	HER	E	MOI	MODEL:				LIC	TERR		V.I.N.: GVW/GCW			CLASS			SIC	FAC	TOR	SEAT (P RAD	IUS		THEST TERM	
GARA	GED)	USE	:		00.00	CHE	CK	AD	D'L NO	D-	UNDRINS					DEDUCT	IBI FS			00:15	IS	PEC M	ISC	
WORI	<td>HOOL MILES</td> <td>335</td> <td>PLEASURE</td> <td></td> <td>COMM'L RETAIL</td> <td>cov</td> <td>ERAGES LIAB</td> <td>FAI</td> <td>JLT D PAY</td> <td></td> <td>UNDRINS MOTOR TOWING</td> <td></td> <td>F FT</td> <td></td> <td>LSP COMP</td> <td>AA</td> <td></td> <td>ST AN</td> <td>CV s</td> <td>COMP</td> <td>]č'</td> <td>OF L</td> <td>R/CR: OTAL PREM</td>	HOOL MILES	335	PLEASURE		COMM'L RETAIL	cov	ERAGES LIAB	FAI	JLT D PAY		UNDRINS MOTOR TOWING		F FT		LSP COMP	AA		ST AN	CV s	COMP]č'	OF L	R/CR: OTAL PREM	
\vdash	- IS	AII EC :		EADM	\vdash	RETAIL	H	NO-	UN		\vdash	& LABOR SPEC	\vdash	'	=	COLL			JOIAN	" "			2011		