

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

**DAKOWES-01** 

YSHAW

06/12/2017

Brunswi 2857 Riv				uch endorsement(s)		•	t. Ast		
2857 Riv	ick Insurance Agency, Inc.	PRODUCER			CONTACT Kelley Wisor				
	Brunswick Insurance Agency, Inc. 2857 Riviera Drive		PHONE (A/C, No, Ext): 4255 FAX (A/C, No):						
	OH 44333			E-MAIL ADDRESS: kwisor@	brunswick	companies.com			
INSURED Dakota West, Inc. 1770 E. Centre, Suite #3 Rapid City, SD 57703			INSURER(S) AFFORDING COVERAGE				NAIC #		
			INSURER A : Hanove						
			INSURER B :						
			INSURER C :						
			INSURER D :						
			INSURER E :						
			INSURER F :						
COVER			E NUMBER:			REVISION NUMBER:			
INDIC/ CERTI	IS TO CERTIFY THAT THE POLICII ATED. NOTWITHSTANDING ANY R IFICATE MAY BE ISSUED OR MAY JSIONS AND CONDITIONS OF SUCH	EQUIREM PERTAIN	ENT, TERM OR CONDITIO , THE INSURANCE AFFOR	N OF ANY CONTRA DED BY THE POLIC	CT OR OTHEF IES DESCRIB PAID CLAIMS	R DOCUMENT WITH RESPE ED HEREIN IS SUBJECT T	CT TO	WHICH THIS	
NSR LTR	TYPE OF INSURANCE	ADDL SUBP	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
	COMMERCIAL GENERAL LIABILITY				, ,	EACH OCCURRENCE	\$		
	CLAIMS-MADE OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$		
						MED EXP (Any one person)	\$		
						PERSONAL & ADV INJURY	\$		
GEI	N'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$		
						PRODUCTS - COMP/OP AGG	\$		
	OTHER:						\$		
AUT	TOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO					BODILY INJURY (Per person)	\$		
	OWNED AUTOS ONLY SCHEDULED					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 \$					PER OTH-	\$		
AND	RKERS COMPENSATION DEMPLOYERS' LIABILITY Y / N					PER OTH- STATUTE ER			
ANY OFF	PROPRIETOR/PARTNER/EXECUTIVE	N / A				E.L. EACH ACCIDENT	\$		
	ndatory in NH) s, describe under					E.L. DISEASE - EA EMPLOYEE	\$		
DES	CRIPTION OF OPERATIONS below elity / Crime		1062359	03/31/2017	03/31/2020	E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
			1002333	03/3 1/20 1/	03/3 1/2020	onent i roperty		1,000,000	

AUTHORIZED REPRESENTATIVE

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