

YSHAW



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/05/2017

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.

tl	SUBROGATION IS WAIVED, subjecting certificate does not confer rights to				ıch end	lorsement(s)	j.				
Brunswick Insurance Agency, Inc. 2857 Riviera Drive Akron, OH 44333 INSURED Action Auto Recovery						CONTACT Kelley Wisor PHONE 4255 FAX					
						(A/C, No, Ext): 4233 (A/C, No):					
						E-MAIL ADDRESS: kwisor@brunswickcompanies.com					
						INSURER(S) AFFORDING COVERAGE			NAIC #		
						INSURER A : Hanover Insurance Companies					
						INSURER B:					
						INSURER C:					
2436 E. 4th St. #84 Long Beach, CA 90814					INSURER D:						
Long Deach, OA 30014						INSURER E:					
					INSURER F:						
				E NUMBER:				REVISION NUMBER:			
II C	HIS IS TO CERTIFY THAT THE POLICII NDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY YOU USIONS AND CONDITIONS OF SUICE	EQU PER	IREMI TAIN,	ENT, TERM OR CONDITIO , THE INSURANCE AFFOR	N OF A	ANY CONTRA 7 THE POLIC	CT OR OTHER	R DOCUMENT WITH RESPE BED HEREIN IS SUBJECT T	CT TO	WHICH THIS	
EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVI INSR LTR TYPE OF INSURANCE ADDL SUBR INSD WVD POLICY NUMBER						POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) LIMITS					
LTR	COMMERCIAL GENERAL LIABILITY	INSD	WVD	POLICT NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)				
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$		
	OEMINO WINDE COOCI								\$		
								MED EXP (Any one person)	\$		
	OFAUL ACCRECATE LUMIT APPLIES DED							PERSONAL & ADV INJURY	\$		
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- JECT LOC							GENERAL AGGREGATE	\$		
								PRODUCTS - COMP/OP AGG	\$		
	OTHER: AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	\$		
	ANY AUTO							(Ea accident) BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$							ACCINECATE	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER	Ψ		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE Y/N							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			1062172		03/31/2017	03/31/2020	Client Property	Ψ	1,000,000	
DES This of \$	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC Fidelity / Crime Coverage Policy is wri 250,000 is held by Allied Finance Adjus	LES (Atten f	ACORI	D 101, Additional Remarks Schedt Three Year Term, billed on Prence, Inc. as applicable la	ule, may b an Ann aws will	e attached if mo ual Basis un I allow	re space is requi til Renewed o	red) or Cancelled Prior. The R	etentio	on / Deductible	
CERTIFICATE HOLDER For Informational Purposes Only						CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					