

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 10/25/2016

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 be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s)

certificate holder in lieu of such endorsement(s).													
PRODUCER								CONTACT IG., INC./RSIG - LIGHTHOUSE INSURANCE SVCS					
IG., INC./RSIG							PHONE (A/C, No, Ext): 703-365-0199//LH703.365.0362 FAX (A/C, No): 703-365-0636						
RECOVERY SPECIALIST INSURANCE GROUP							E-MAIL ADDRESS: CERTIFICATES@RSIG.COM						
SWBC INSURANCE SERVICES INC.							INSURER(S) AFFORDING COVERAGE				NAIC #		
9811 S IH 35, BLDG 1, STE 100, AUSTIN, TX 78744						TX 78744	INSURER A: ROCKHILL INSURANCE COMPANY					28053	
INSURED						INSURER B: LLOYDS OF LONDON				15792			
							INSURE		IRER C: PLAZA INSURANCE COMPANY			30945	
		BIGFOOT RE	BIGFOOT RECOVERY, LLC			1375	INSURER D:						
		PO BOX 76	O BOX 76					INSURER E:					
		PROSPERITY			SC 29127			INSURER F:					
СО	VER	AGES	CER	TIFIC	CATE	NUMBER: RRPMSW0				REVISION NUMBER:	16-1	17Renewal	
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE										NAMED ABOVE FOR THE			
INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS													
CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.											HE LERMS,		
INSR LTR		ADDI SUBR						POLICY EFF	POLICY EXP	LIMIT	rs		
		ERAL LIABILITY			VVVD	RRPMSW00001-01		(MM/DD/YYYY) 10/01/2016	(MM/DD/YYYY)	EACH OCCURRENCE	1	1,000,000.00	
Α	Х	COMMERCIAL GENERAL LIABILITY				IG., INC./RSIG MASTER INC ERRORS & OMISSIONS		10/01/2010	10/01/2017	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000.00	
		CLAIMS-MADE X OCCUR								MED EXP (Any one person)	\$	5.000.00	
		CLAIIVIS-IVIADE 7	M OCCOR			INC WRONGFUL REPO				PERSONAL & ADV INJURY	_	1,000,000.00	
		-				DRIVE-AWAY - \$1MIL				GENERAL AGGREGATE		5,000,000.00	
	GEN	L AGGREGATE LIMIT APPLIES PER: CARGO/ON-HOOK - \$1M		_			PRODUCTS - COMP/OP AGG		3.000.000.00				
	X	POLICY PRO- JECT	LOC			REPOSSESSED AUTO -\$1	IMIL			REPO IN TRANSIT		1,000,000.00	
		OMOBILE LIABILITY	1 100							COMBINED SINGLE LIMIT (Ea accident)	_	1.000.000.00	
С		ANY AUTO ALLOWNED X SCHEDULED AUTOS				PRPSW008238-00 COMP/COLL DED \$100		06/13/2016	06/13/2017	BODILY INJURY (Per person)	\$	1,000,000.00	
\ \										BODILY INJURY (Per accident)	<u> </u>		
	Х	HIRED AUTOS X	NON-OWNED AUTOS			COMP/COLL DED \$10	100			PROPERTY DAMAGE (Per accident)	\$		
		TIIKED AUTOS X	A0105							(Per accident)	\$		
Α		UMBRELLA LIAB	X occur			RRPMSW00001-01		10/01/2016	10/01/2017	EACH OCCURRENCE	<u> </u>	2,000,000.00	
	Х	EXCESS LIAB	CLAIMS-MADE			SEE DESC. OF OPERATION	ONS	10/01/2010	10/01/2017	AGGREGATE	+ -	INC. GEN AGG	
	^			1						AGGREGATE	\$		
	DED   RETENTION \$   WORKERS COMPENSATION								WC STATU- OTH- TORY LIMITS ER	\$			
		EMPLOYERS' LIABILITY											
	OFF	PROPRIETOR/PARTNER ICER/MEMBER EXCLUDE Indatory in NH)	ED?	N/A						E.L. EACH ACCIDENT  E.L. DISEASE - EA EMPLOYEE	\$		
	If yes	s, describe under								E.L. DISEASE - POLICY LIMIT	\$		
Α		DESCRIPTION OF OPERATIONS below CRIME/EMP DISHONESTY RRPMSW 00001-(				DDDMCW00001 01		10/01/2016	10/01/2017		· ·		
A	_	RAGEKEEPERS DIRECT PRIMARY RRPMSW00001-01					10/01/2016 10/01/2017 LIMIT: \$1,000,000.00 10/01/2016 10/01/2017 GKDP LIMIT: \$300,000.00					n	
В					B113610002C160001				7 GKDP EXCESS: \$700,000.00				
				IFS (	Attach		Schedule			GRDF LACESS. \$70	5,000	0.00	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  RSIG MEMBER SINCE: 06/12/08 -30 DAY CANCELLATION NOTICE EXCEPT IN CASES OF NON-PAYMENT OR CANCELLATION BY													
MEMBER REQUEST & ADDITIONAL INSURED STATUS, APPLIES TO THE CERT HOLDER AS REQ BY WRITTEN CONTRACT													
LOCATION: 8534 HWY 76, PROSPERITY, SC 29127. PRIMARY LIMITS PROVIDE FULL \$3,000,000 LIMIT WITH A \$5,000,000 AGG IN LIE													
OF A SEPARATE EXCESS LIABILITY POLICY													
SCHEDULED AUTO:2006 CHEV 3500 (148769); 2014 DODGE 4500 (F172980); 2015 DODGE 4500 (505983)													

CERTIFICATE HOLDER CANCELLATION

ALLIED FINANCE ADJUSTERS CONFERENCE, INC 888-949-8520 456 S BARTLETT RD SUITE #321

60103

IL

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

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