

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/12/2019

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).

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PRODUCER				CONTACT IG., INC./RSIG - LIGHTHOUSE INSURANCE SVC	S		
	IG., INC./RSIG			PHONE (A/C, No, Ext): 703-365-0199//LH703.365.0362 FAX (A/C, No): 703-3	65-0636		
	RECOVERY SPECIALIST INSURANCE GROUP GATE ELEVEN SOLUTIONS 2500 ONION CREEK PKWY, AUSTIN TX 78747			É-MÁIL ADDRESS: CERTIFICATES@RSIG.COM			
				INSURER(S) AFFORDING COVERAGE	NAIC #		
				INSURER A: GUIDEONE MUTUAL INSURANCE CO	15032		
INSURED				INSURER B: LLOYDS OF LONDON	15792		
				INSURER C: SCOTTSDALE INDEMNITY COMPANY	15580		
	BIGFOOT RECOVERY, LLC PO BOX 76 PROSPERITY		1375 29127	INSURER D:			
		sc		INSURER E:			
				INSURER F:			
COVERAG	ES CERTIFIC	CATE NUM	3FR: G1-28///8	REVISION NUMBER: 19-200	GuideOne		

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD 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 TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY		57000001-01	09/01/2019	09/01/2020	EACH OCCURRENCE \$ 1,000,000.00
Α	X COMMERCIAL GENERAL LIABILITY		ERRORS & OMISSIONS			DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000.00
	CLAIMS-MADE X OCCUR		WRONGFUL REPO,			MED EXP (Any one person) \$ 5,000.00
	X CYBLIAB \$2MIL POLICYAGG		REPOSSESSED AUTO,			PERSONAL & ADV INJURY \$ 1,000,000.00
C	X CYBER LIAB - \$100,000		DRIVE-AWAY,CARGO,			GENERAL AGGREGATE \$ 5,000,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:		ON-HOOK - EACH \$1MIL LIMIT			PRODUCTS - COMP/OP AGG \$ 3,000,000.00
	X POLICY PRO- JECT LOC		EKI3302364 - CYBER			REPO IN TRANSIT \$ 1,000,000.00
	AUTOMOBILE LIABILITY A ANY AUTO		570000231-00 COMP/COLL DED \$1000	06/13/2019	06/13/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000.00
Α						BODILY INJURY (Per person) \$
	ALL OWNED X SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	X HIRED AUTOS X NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
						\$
Α	UMBRELLA LIAB X OCCUR		57000001-01	09/01/2019	09/01/2020	
	X EXCESS LIAB CLAIMS-MADE		SEE DESC. OF OPERATIONS			AGGREGATE \$ INC. GEN AGG
	DED RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N					WC STATU- OTH- TORY LIMITS ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE					E.L. EACH ACCIDENT \$
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)					E.L. DISEASE - EA EMPLOYEE \$
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT \$
Α	A EMPLOYEE DISHONESTY&COMP CRIME		570000001-01		l l	LIMIT: \$1,000,000.00
Α			57000001-01		l l	GKDP LIMIT: \$300,000.00
_	B GARAGEKEEPERS DIR PRIM EXC B1136P0406719 09/01/2019 09/01/2020 GKDP EXCESS: \$700,000.00					

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 LIEU OF A SEPARATE EXCESS LIABILITY POLICY

SCHEDULED AUTO: 14 RAM #2980; 15 RAM #5983

CERTIFICATE HOLDER	CANCELLATION			
ALLIED FINANCE ADJUSTERS CONFERENCE, INC 888-949-8520	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
<u>HOMEOFFICE@ALLIEDFINANCEADJUSTERS.COM</u>	AUTHORIZED REPRESENTATIVE			
PO BOX 3853 MIDLAND TX 79702	Danadoan			

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