

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/8/2019

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 Melissa Frawley				
Harding Brooks Associat	es L	LC	PHONE (A/C, No, Ext): (315) 214-5822 FAX (A/C, No): (607) 798	FAX (A/C, No): (607) 798-6693			
441 Commerce Rd.			E-MAIL ADDRESS: mfrawley@hardingbrooks.com				
			INSURER(S) AFFORDING COVERAGE	NAIC #			
Vestal	NY	13850	INSURERA: Wesco Insurance Company Inc	25011			
INSURED			INSURER B: Lloyd's of London	15792			
Sun West Recovery Inc.,	DBA	: Sun West Solutions	INSURER C:				
28053 Mitchell Ave			INSURER D:				
			INSURER E:				
Punta Gorda	FL	33982	INSURER F:				
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COVERAGES CERTIFICATE NUMBER: CL1910818799

REVISION NUMBER:

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 MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE			SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
		COMMERCIAL GENERAL LIABILITY				,		EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000
A	х	CLAIMS-MADE X OCCUR Wrongful Repo (E&O)	x		WPP-6546465-00	10/15/2019	10/15/2020	PREMISES (Ea occurrence) MED EXP (Any one person)	\$ 100,000 \$ 5,000
								PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PROJECT LOC							GENERAL AGGREGATE	\$ 3,000,000
								PRODUCTS - COMP/OP AGG	\$ 3,000,000
		OTHER:						Wrongful Reposession (E&O)	\$ 1,000,000
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
A		ANY AUTO			WPP-6546465-00	10/15/2019	10/15/2020	BODILY INJURY (Per person)	\$
		ALL OWNED X SCHEDULED AUTOS	x					BODILY INJURY (Per accident)	\$
	х	HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
	х	Drive Away							\$
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
	DED RETENTION \$								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?							E.L. EACH ACCIDENT	\$
	(Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$
В	Garagekeepers Direct Prim				MAP-9819984-00	10/15/2019	10/15/2020	\$1,500 Ded	\$375,000
A	A On-Hook Cargo				WPP-6546465-00	10/15/2019	10/15/2020	\$1,000 Ded	\$100,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder is an additional insured only when required by written contract or agreement as per referenced policy forms. Lot Location: 28053 Mitchell Ave Punta Gorda FL 33982

CERTIFICATE HOLDER CANCELLATION

 ${\tt allied finance adjusters @gmail.}$

Allied Financial Adjusters Conference Inc 956 S. Bartlett Road Suite 321 Bartlett, IL 60103 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

Thomas Harding/HAILY

Thoms A Hardin