		AANDCRO-01				LPERRAULT		
ACORD <sup>®</sup> CERT		<b>FIFICATE OF LIABILITY INSURANCE</b>					DATE (MM/DD/YYYY) 9/9/2024	
THIS CERTIFICATE IS ISSU CERTIFICATE DOES NOT A BELOW. THIS CERTIFICAT REPRESENTATIVE OR PROD	FFIRMATIVELY O	R NEGATIVELY AMEND E DOES NOT CONSTITU	, EXTEND OR ALT	ER THE CO	VERAGE AFFORDED	ATE HOL	DER. THIS	
IMPORTANT: If the certific If SUBROGATION IS WAIVE this certificate does not confe	ate holder is an Al D, subject to the	DITIONAL INSURED, the terms and conditions of	the policy, certain	policies may				
PRODUCER License # 0M63276	<u> </u>			$\times$				
Hard Insurance Services Inc.		PHONE (A/C, No, Ext): (909)				$\langle \rangle \rangle \rangle$		
							NAIC # 12833	
INSURED			INSURER A : AIX Specialty Insurance Company INSURER B : HDI Specialty Insurance Company			12033		
A and C Roofing, Inc.			INSURER B: HDI Specialty Insurance Company INSURER c : Cypress Insurance Company (CA)			10855		
dba: Roof Repair Specialist 1061 N. Victory Pl.		INSURER D :						
Burbank, CA 91502			INSURER E :					
			INSURER F :					
COVERAGES CERTIFICATE NUMBER:					REVISION NUMBER:			
THIS IS TO CERTIFY THAT TH INDICATED. NOTWITHSTANDIN CERTIFICATE MAY BE ISSUED EXCLUSIONS AND CONDITIONS	NG ANY REQUIREM ) OR MAY PERTAIN	ENT, TERM OR CONDITIO , THE INSURANCE AFFOR . LIMITS SHOWN MAY HAVE	N OF ANY CONTRAC DED BY THE POLICI	CT OR OTHER	E DOCUMENT WITH RES	PECT TO TO ALL 1	WHICH THIS	
A X COMMERCIAL GENERAL LIAE	INSD WVD	POLICY NUMBER	(MM/DD/YYYY)			AITS	1,000,000	
	CCUR	L13-J243025-01	12/5/2023	12/5/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ \$	100,000	
					MED EXP (Any one person)	\$ \$	5,000	
					PERSONAL & ADV INJURY	\$	1,000,000	
_GEN'L AGGREGATE LIMIT APPLIES	SPER:				GENERAL AGGREGATE	\$	2,000,000	
X POLICY PRO- JECT	LOC				PRODUCTS - COMP/OP AG	G \$	2,000,000	
					COMBINED SINGLE LIMIT	\$	1,000,000	
AUTOMOBILE LIABILITY		HFM00217-00	9/7/2024	9/7/2025	(Ea accident)	\$	1,000,000	
	DULED S		5///2024	5///2025	BODILY INJURY (Per person BODILY INJURY (Per accider			
	OWNED S ONLY				PROPERTY DAMAGE (Per accident)	s		
	S ONET				(i ei acciaent)	\$		
UMBRELLA LIAB 00	CCUR				EACH OCCURRENCE	\$		
EXCESS LIAB CL	LAIMS-MADE				AGGREGATE	\$		
C WORKERS COMPENSATION					Y PER OTH-	\$		
AND EMPLOYERS' LIABILITY	Y/N	AAWC557114	9/12/2024	9/12/2025	STATUTE ER		1,000,000	
ANY PROPRIETOR/PARTNER/EXECU OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A				E.L. EACH ACCIDENT	\$	1,000,000	
If yes, describe under DESCRIPTION OF OPERATIONS bei	low				E.L. DISEASE - EA EMPLOY E.L. DISEASE - POLICY LIMI		1,000,000	
		D 101 Additional Remarka Sabada	de mey he ottoched if mer		ad			
DESCRIPTION OF OPERATIONS / LOCATIONS	IONS / VEHICLES (ACOR	D 101, Additional Remarks Schedu	ıle, may be attached if mor	e space is requir	ed)			
CERTIFICATE HOLDER			CANCELLATION					
***Evidence of Insurance***			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 REPRESE	NTATIVE				
			the it	S				
			4m TT	5				

The ACORD name and logo are registered marks of ACORD

© 1988-2015 ACORD CORPORATION. All rights reserved.