

PHELPSA

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/28/2023

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. 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).

PRODUCER	01:00 - 17:00 0	110	CO	CONTACT David Hendrick					
	Office of America	The Marie	PH(PHONE (A/C. No. Ext): (941) 328-1289 14105 FAX (A/C. No.: (407					
	d, FL 32750	No	E-N	E-MAIL ADDRESS: david.hendrick@ioausa.com					
The state of the state of				INSURER(S) AFFORDING COVERAGE				NAIC#	
2	D. William Co.	100 10	INS	INSURER A: Greenwich Insurance Company				22322	
NSURED	IN THE	Car Colle	INS	INSURER B: American Interstate Insurance Company					
Tree Work Now, Inc. 1702 N Woodland Blvd., #116433 Deland, FL 32720				INSURER C:					
				INSURER D:					
				INSURER E:				E STEEL	
0,0	The Market Mo	A STATE OF	INS	URER F :	<u> </u>	E. 70	N	31Z	
COVERA	GES CE	ERTIFICATE NUM	/IBER:	and the second	- Mr.	REVISION NUMBER	&_ O.	-50	
INDICAT CERTIFI	TO CERTIFY THAT THE POLICED. NOTWITHSTANDING ANY CATE MAY BE ISSUED OR MAIONS AND CONDITIONS OF SUC	REQUIREMENT, THE	TERM OR CONDITION O INSURANCE AFFORDED	F ANY CONTRA BY THE POLIC	CT OR OTHER IES DESCRIB	R DOCUMENT WITH RES ED HEREIN IS SUBJEC	SPECT T	O WHICH THIS	
	TYPE OF INSURANCE	ADDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP	C . (1) L	IMITS	2000	
NSR LTR	I II E OI INGUNANCE								
NSR LTR A X C	COMMERCIAL GENERAL LIABILITY	4400	10,0	Marie	SVZ	EACH OCCURRENCE	\$	1,000,000	
A		4,2	1004032-03	9/28/2023	9/28/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000 300,000	

LTR	TR TYPE OF INSURANCE		INSD WVD POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY		250	10	Marie	SVZ	EACH OCCURRENCE \$	1,000,000
	-	CLAIMS-MADE X OCCUR	200	NPC-1004032-03	9/28/2023	9/28/2024	DAMAGE TO RENTED PREMISES (Ea occurrence) \$	300,000
		70 S. M. S. M.	<u>_</u>	C. 10 101	11 11 14	4.	MED EXP (Any one person) \$	5,000
	1	E. Tee		24 M. C. 12	100	. The	PERSONAL & ADV INJURY \$	1,000,000
. 9	GEN'L AGGREGATE LIMIT APPLIES PER:		120	32	101	1/0,	GENERAL AGGREGATE \$	2,000,000
ē,	X	X POLICY X PRO-	11/2	Mary South	CIVING THE	Comment	PRODUCTS - COMP/OP AGG \$	2,000,000
		OTHER:	10				EMPLOYMENT PRAC _{\$}	50,000
Α	AUTOMOBILE LIABILITY		0	The Man My	The same of	. 0	COMBINED SINGLE LIMIT (Ea accident) \$	1,000,000
	X	ANY AUTO	20.	NBA-1004033-03	9/28/2023	9/28/2024	BODILY INJURY (Per person) \$.01.2
ď		OWNED SCHEDULED AUTOS ONLY	100				BODILY INJURY (Per accident) \$	4.00
10	1	HIRED NON-OWNED AUTOS ONLY	100				PROPERTY DAMAGE (Per accident) \$	S. Ch.
v.		the state of the s		all of the sale	110	The state of	\$	a de
Α	30	UMBRELLA LIAB X OCCUR	. 4	NEC-6006257-03	9/28/2023	9/28/2024	EACH OCCURRENCE \$	2,000,000
	X	EXCESS LIAB CLAIMS-MADE	186				AGGREGATE \$	2,000,000
W.		DED X RETENTION \$ 0	W. 10.	78 0 1	10.00	\$	-de- 1/4	
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		All I	Marie Marie	10 × 10	1, 10	X PER OTH-ER	" " " Mari
	ANY	PROPRIETOR/PARTNER/EXECUTIVE // N		AVWCFL3208262023	9/3/2023	9/3/2024	E.L. EACH ACCIDENT \$	1,000,000
	OFFI (Man	CER/MEMBER EXCLUDED?	N/A				E.L. DISEASE - EA EMPLOYEE \$	1,000,000
40	If yes, describe under DESCRIPTION OF OPERATIONS below		00	W. W.	1010	100	E.L. DISEASE - POLICY LIMIT \$	1,000,000
Α	Con	ntractor Equipment	60	NPC-1004032-03	9/28/2023	9/28/2024	Lease/Rent Equipment	100,000
	9.	0.1	-3.7	10.4	10,70	11/2	100	1000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required Coverage is subject to policy forms, conditions & exclusions.

CERTIFICATE HOLDER	CANCELLATION			
L 1 0 0 0 0	7			

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

FOR INFORMATIONAL PURPOSES ONLY
Tree Work Now, Inc.
1702 N Woodland Blvd., #116433
Deland, FL 32720

AUTHORIZED REPRESENTATIVE

ACORD 25 (2016/03)

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