

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/31/2019

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 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).

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PRODUCER						CONTACT Cindy Jones					
ABC Agency, Inc.						PHONE (800) 555-5555 (A/C, No, Ext): (800) 555-5554					
8055 East Avenue						E-MAIL cindy.jones@abc.com					
Suite 1000						INSURER(S) AFFORDING COVERAGE					
Houston Tx 77007						INSURER A : Carrier Name				AIC #	
INSURED						INSURER B: Carrier Name				####	
XYZ Company					INSURER C : Carrier Name				#:	####	
5470 Lincoln St					INSURER D : Carrier Name				#:	####	
					INSURER E : Carrier Name				#:	####	
Houston				TX 77007	INSURER F:						
COVERAGES CERTIFICATE NUMBER: 19-20 Master 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   POLICY EFF   POLICY EXP											
LTR	TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS			
А	COMMERCIAL GENERAL LIABILITY				01/0		01/01/2021	DAMAGE TO DENTED	1,000,000		
	CLAIMS-MADE X OCCUR					01/01/2020		DAMAGE TO RENTED PREMISES (Ea occurrence) \$	100,000		
								MED EXP (Any one person) \$	\$ 10,000		
		Υ	Y	ATN00000000				PERSONAL & ADV INJURY \$	+ *		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE \$	1		
	POLICY PRO- LOC							PRODUCTS - COMP/OP AGG \$	\$ 2,000,000		
	OTHER:							\$			
В	AUTOMOBILE LIABILITY		Y				01/01/2021	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000		
	X ANY AUTO				01			BODILY INJURY (Per person) \$			
	OWNED AUTOS ONLY SCHEDULED AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY	Y		ZD0000		01/01/2020		BODILY INJURY (Per accident) \$			
								PROPERTY DAMAGE (Per accident) \$	\$		
								\$			
С	UMBRELLA LIAB COCCUR	YY	Y			01/01/2020	01/01/2021	EACH OCCURRENCE \$	5,000,000		
	EXCESS LIAB CLAIMS-MADE			MKL0000000000000				AGGREGATE \$	5,000,000		
	DED   RETENTION \$ 0						\$				
D	VORKERS COMPENSATION AND EMPLOYERS' LIABILITY							➤ PER OTH-ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A	Υ	WC900000000000		01/01/2020	01/01/2021	E.L. EACH ACCIDENT \$	1,000,000		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		•	***************************************	0 1/0 1/202	01/01/2020	01/01/2021	E.L. DISEASE - EA EMPLOYEE \$	1,000,000		
								E.L. DISEASE - POLICY LIMIT \$	1,000,000		
								Ea Occurrence Limit			
E								Aggregate Limit			
								Ea Occurrence Ded.			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)											
O'Donnell/Snider Construction, LLC is included as an Additional Insured with respect to General Liability and Automobile Liability as required by written contract. Excess (Umbrella) policy follows form.  A Waiver of Subrogation applies with respect to General Liability, Automobile Liability, and Workers Compensation. Excess (Umbrella) policy follows form.											
CERTIFICATE HOLDER CANCELLATION											
O'Donnell/Snider Construction, LLC 1900 West Loop South, Suite 500						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
Houston TX 77027						AUTHORIZED REPRESENTATIVE					