



# *Qualities*



*Individualized  
Project Manager  
from  
Start to Finish*

*Great reviews  
on Google  
and more!*

*Four season  
long warranty!*

*Customized  
solutions  
for each  
home!*

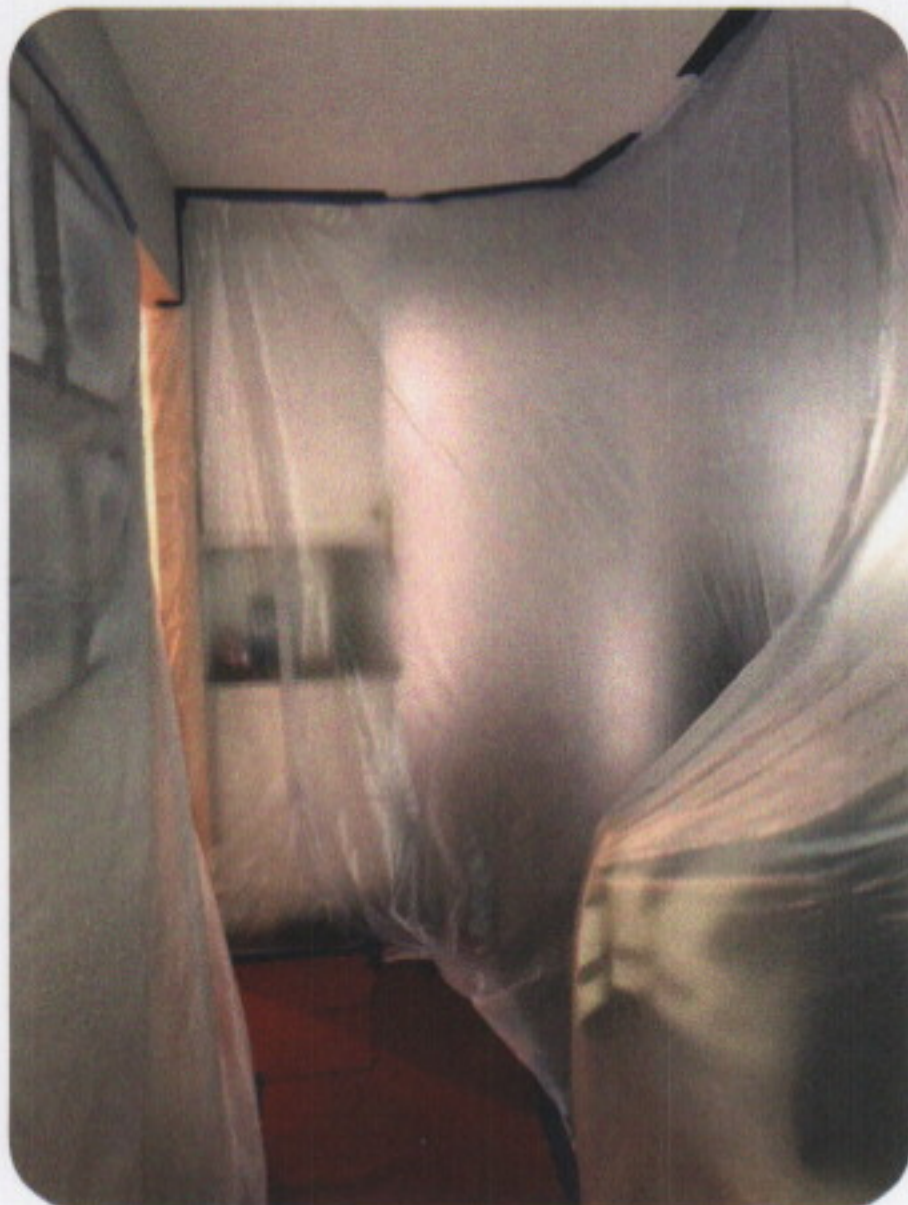
*We only  
employ legally!  
No subs!*

*Locally owned  
and operated!*

*Fully licensed,  
bonded  
and insured!*



## Setup / Prep



*"Sorin And Nathan were fabulous!! They answered all my questions and **treated me and my home with respect.** I would absolutely recommend them to anyone needing attic work. Thank you so much."*

**-Tresa B.**

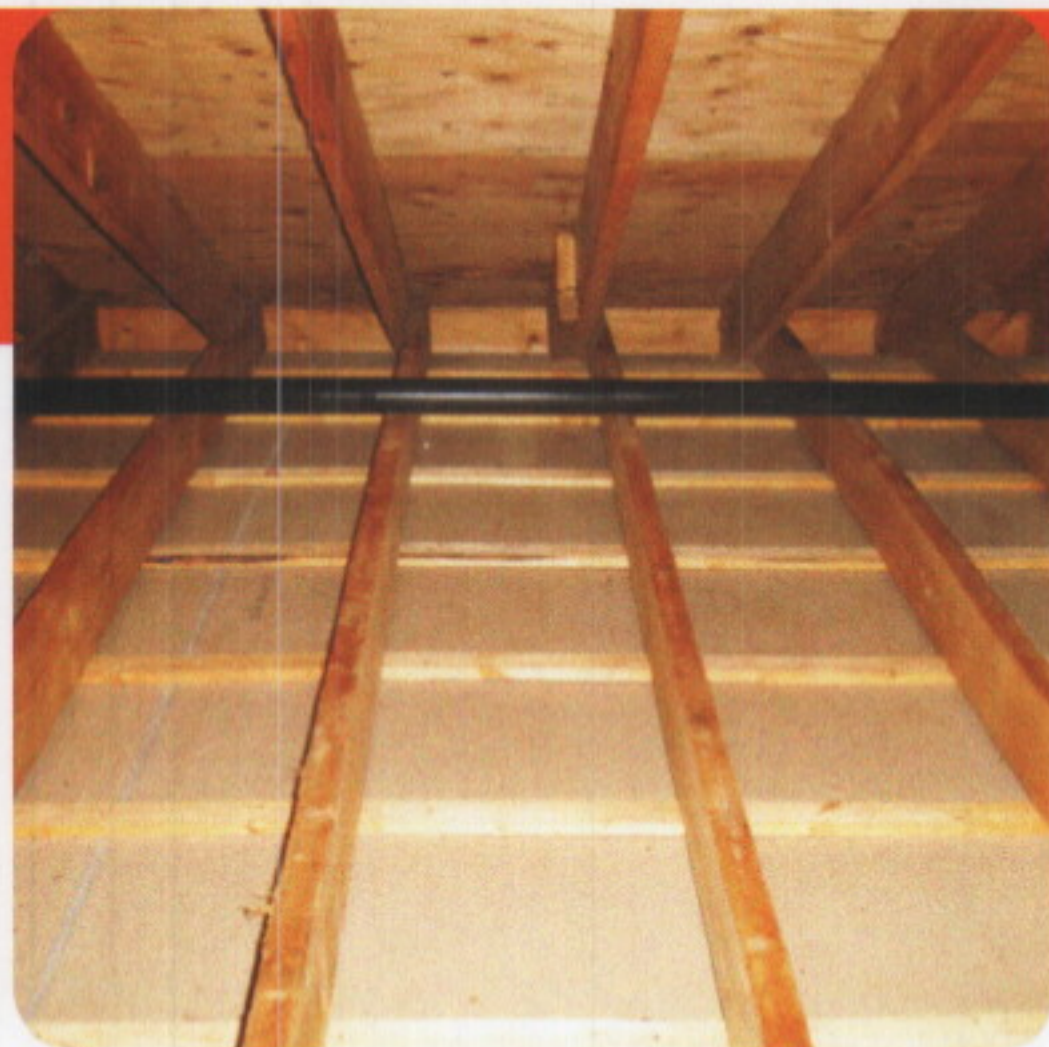




# Attic Projects

Attic & Crawl Space Experts

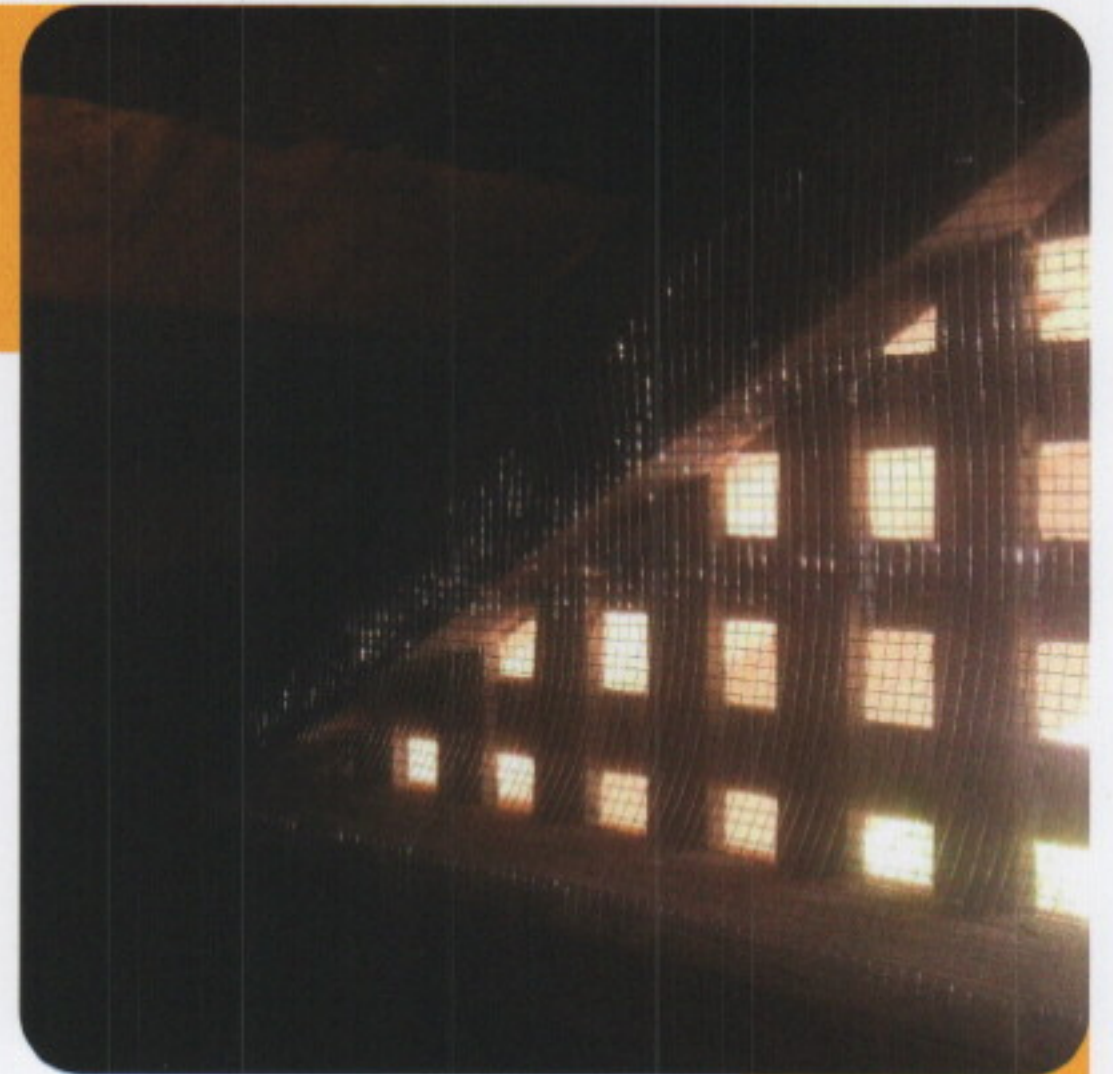
*Before*



*After*



**Rodent Proofing**



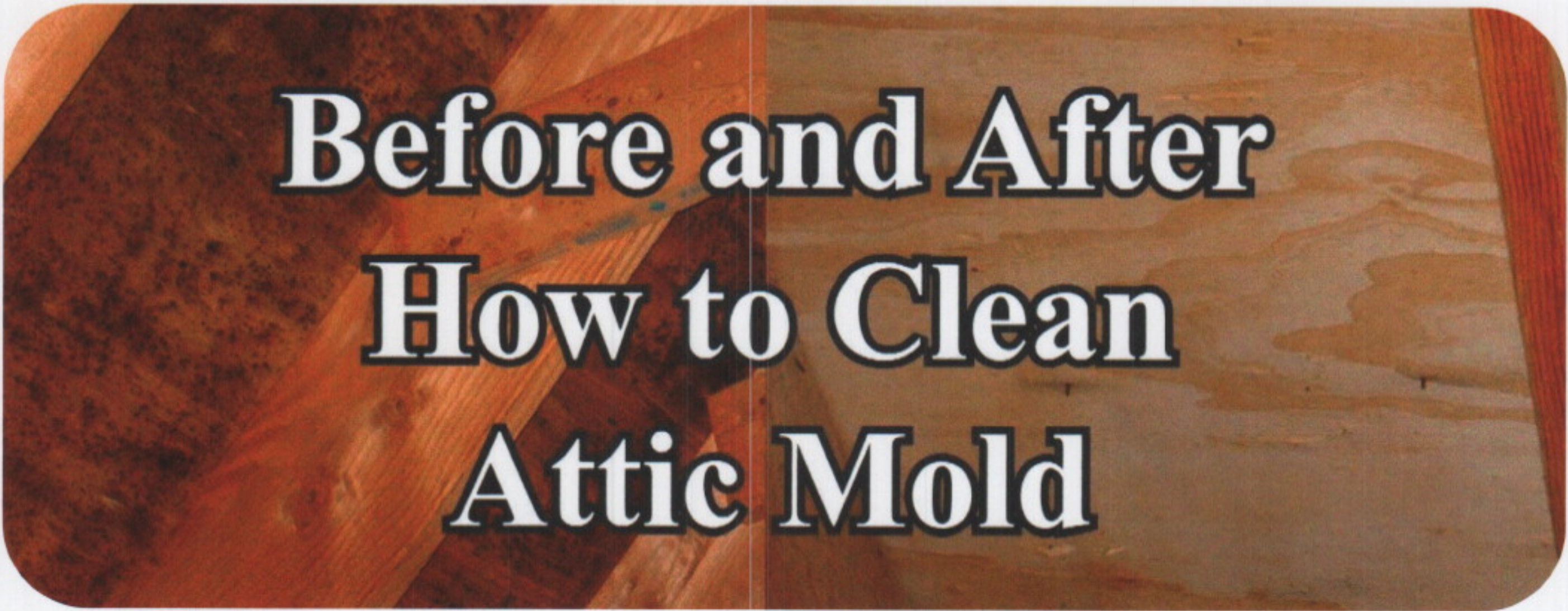
**Up To 10 Year  
Warranty**







***Mold  
Remediation***

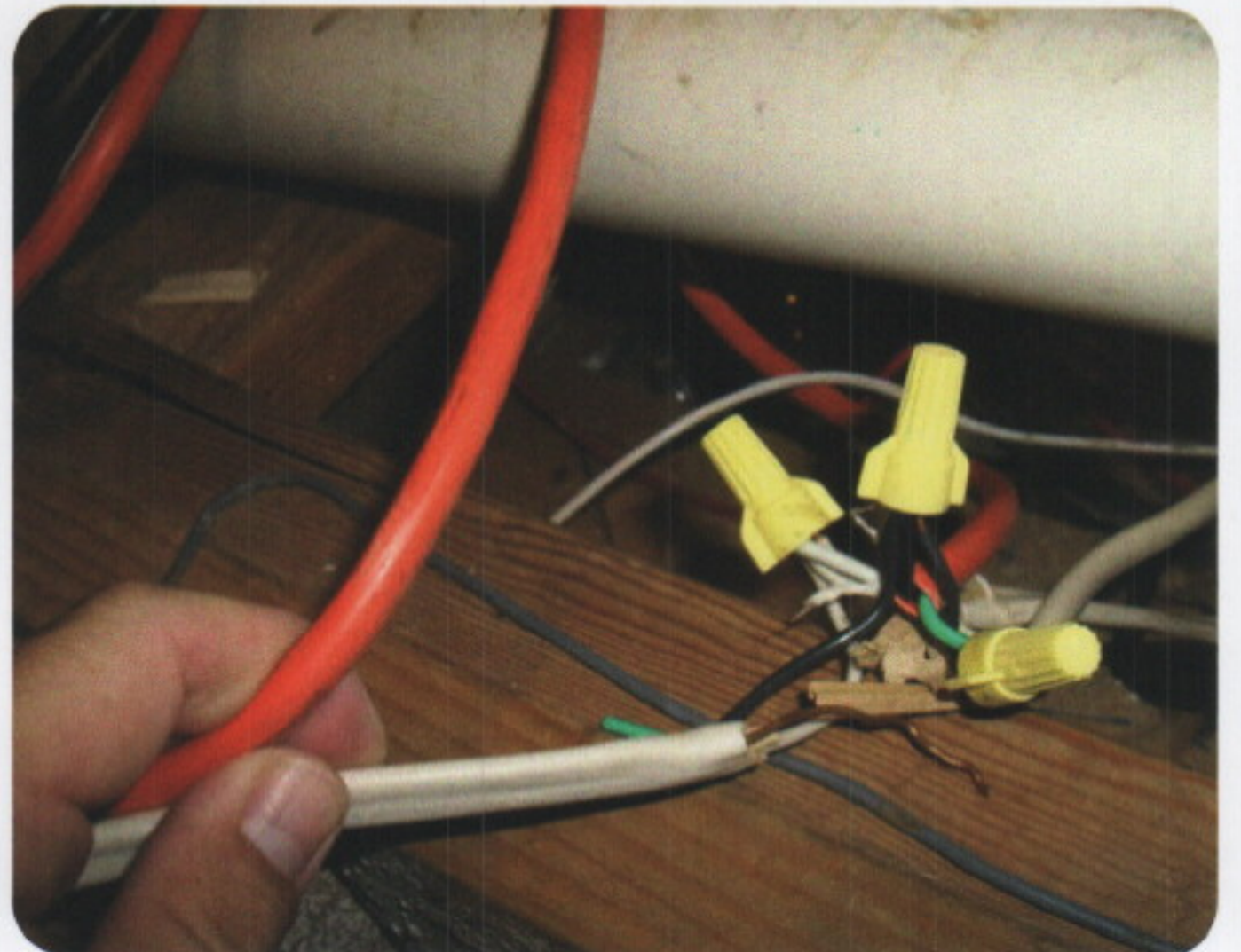
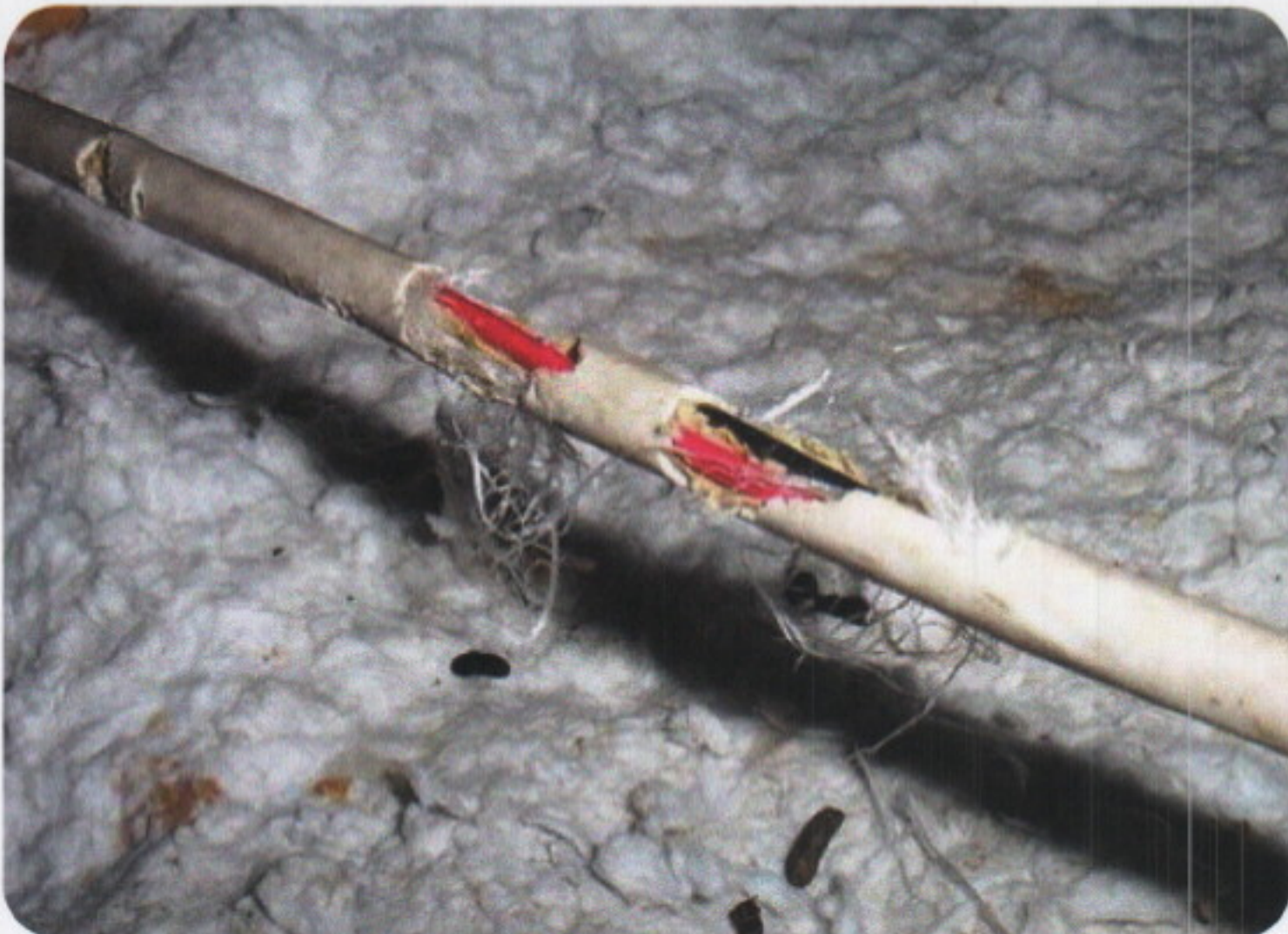
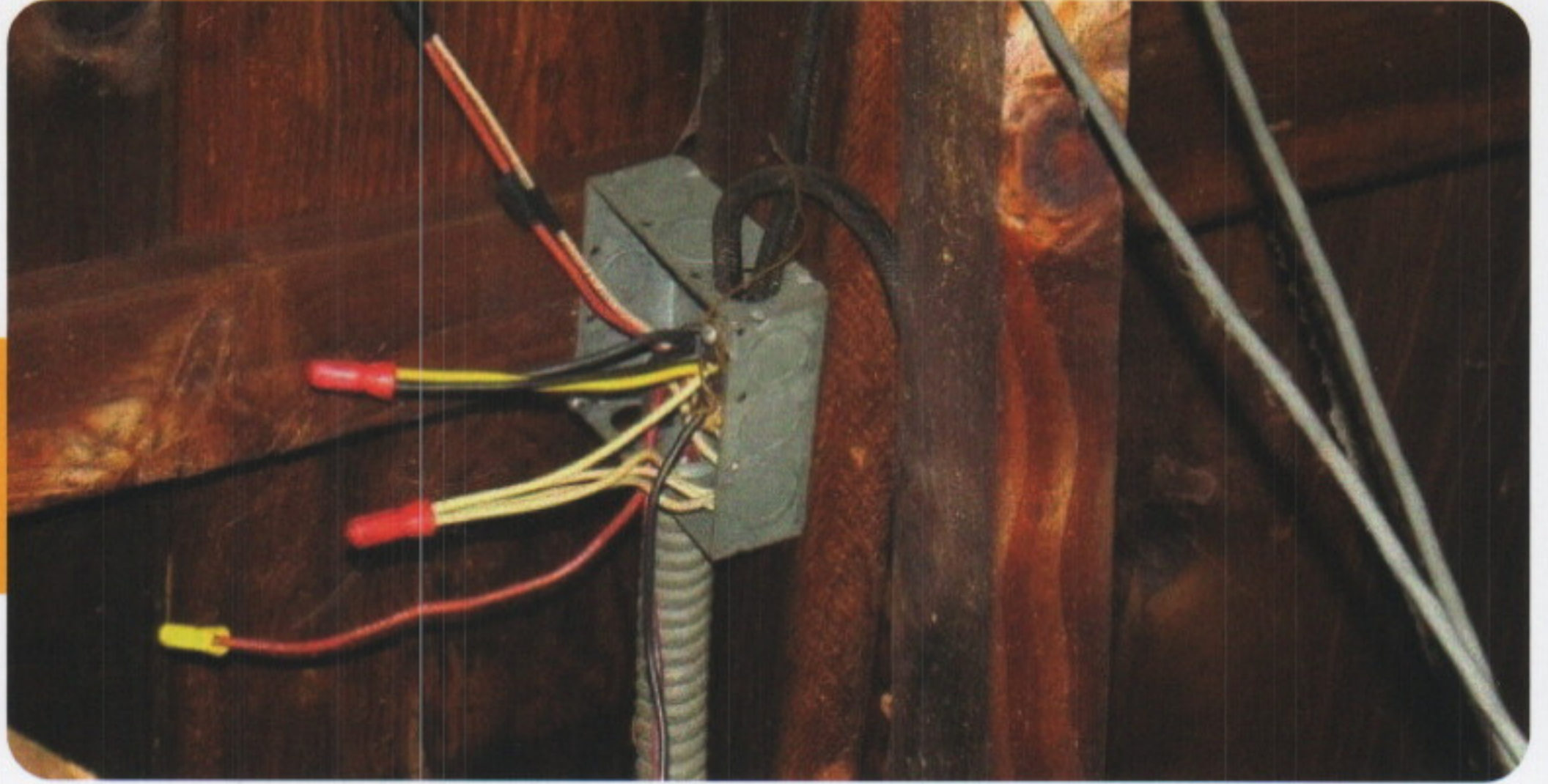


**Before and After  
How to Clean  
Attic Mold**





**Electrical**



**Safety  
First**



***Ducting  
Installation,  
Repair, and  
Cleaning.***



***Duct leaks are more common  
than you may realize, and they  
are easy to fix!***



***"The quality of work they did was amazing.  
And, they were so quick and clean!"***

***-Mark L.***



*Air Sealing*



*Energy Efficient*





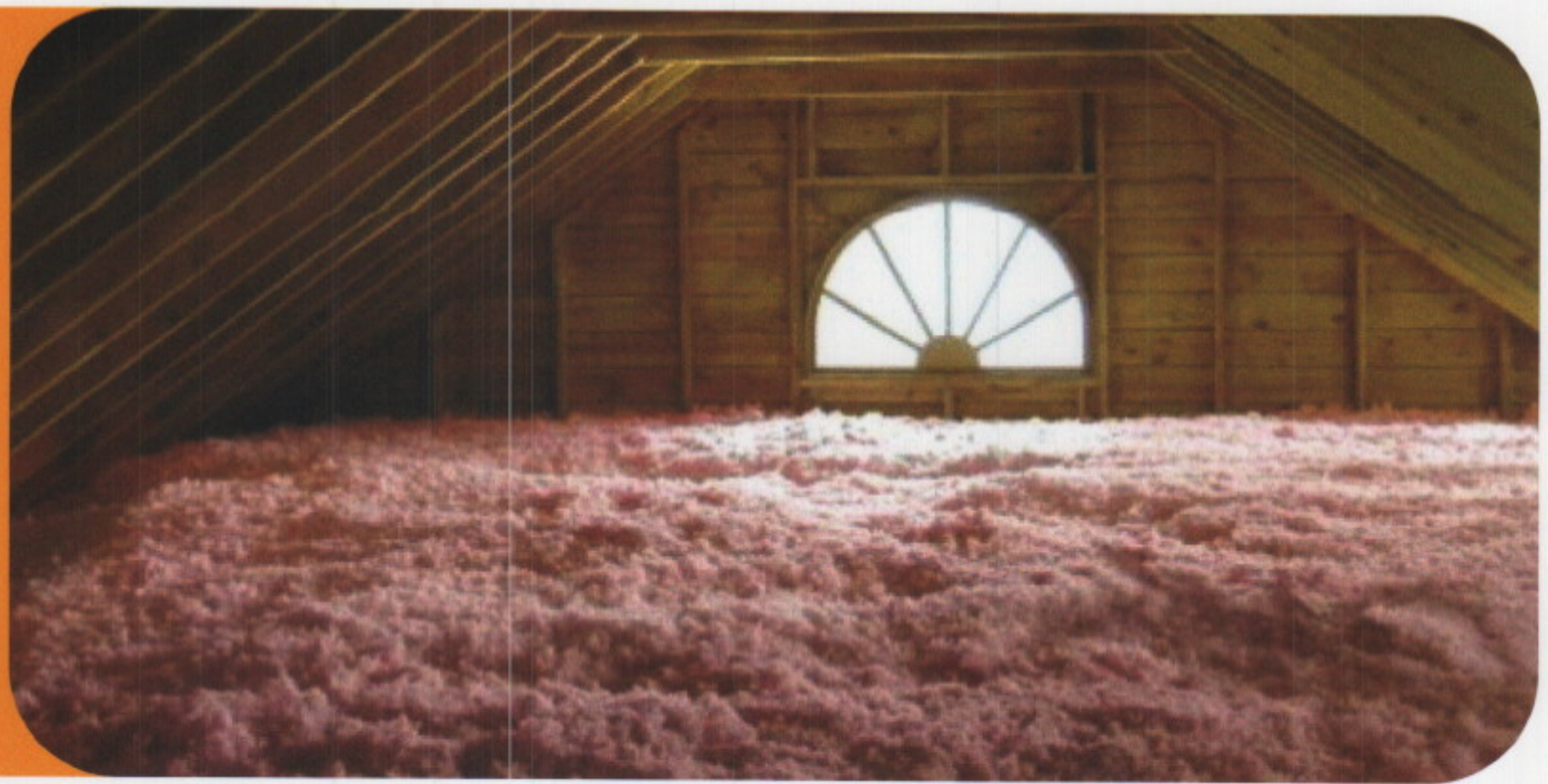
# Attic Projects

Attic & Crawl Space Experts



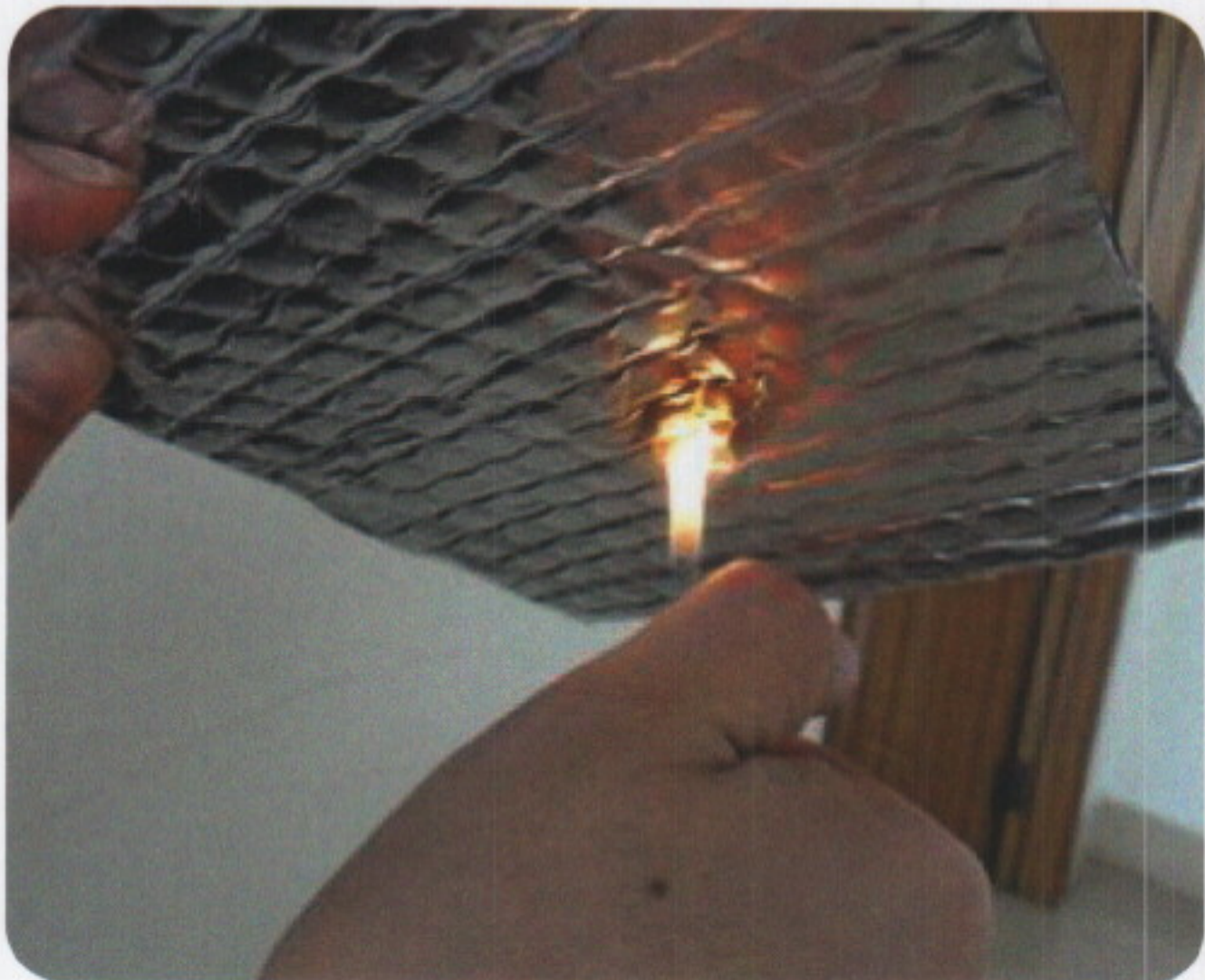
*Precisely  
Insulated*

*100%  
coverage*





**Radiant  
Barrier**





# Crawl Space Services

**Vapor /  
Moisture  
Barrier**







# CONTRACTORS STATE LICENSE BOARD

Pursuant to Chapter 9 of Division 3 of the Business and Professions Code and the Rules and Regulations of the Contractors State License Board, the Registrar of Contractors does hereby issue this license to:

**ATTIC PROJECTS LLC**

**License Number 1035247**

to engage in the business or act in the capacity of a contractor in the following classifications:

- B - GENERAL BUILDING
- C-2 - INSULATION AND ACOUSTICAL

Witness my hand and seal this day,  
September 26, 2022

**Issued January 26, 2018**  
**Reissued November 13, 2020**

*Mary T. Teichert*

Mary T. Teichert, Board Chair

*David R. Fogt*

David R. Fogt, Registrar of Contractors

This license is the property of the Registrar of Contractors, is not transferable, and shall be returned to the Registrar upon demand when suspended, revoked, or invalidated for any reason. It becomes void if not renewed.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
5/25/2023

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 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).

<b>PRODUCER</b> Business & Contractors Insurance Services, Inc. 9855 Prospect Ave. Suite D Santee CA 92071		<b>CONTACT NAME:</b> Annette Paul <b>PHONE (A/C, No, Ext):</b> (619) 592-4440 <b>FAX (A/C, No):</b> (619) 592-4449 <b>E-MAIL ADDRESS:</b> annette@bcisinc.net															
<b>INSURED</b> Attic Projects, LLC 7220 Trade Street #202 San Diego CA 92121		<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Associated Industries Insurance Company</td> <td>23140</td> </tr> <tr> <td>INSURER B: Clear Blue Specialty</td> <td></td> </tr> <tr> <td>INSURER C: Everest Premier Ins Co</td> <td>16045</td> </tr> <tr> <td>INSURER D: Evanston Insurance Company</td> <td>35378</td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Associated Industries Insurance Company	23140	INSURER B: Clear Blue Specialty		INSURER C: Everest Premier Ins Co	16045	INSURER D: Evanston Insurance Company	35378	INSURER E:		INSURER F:	
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**COVERAGES**      **CERTIFICATE NUMBER:** CL2352519616      **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	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			AES122540800	1/12/2023	1/12/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			BW03STR230015700	5/18/2023	5/18/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> EXCESS LIAB OCCUR <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	7600024040231	1/31/2023	1/31/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	<b>BPP</b>			1AA327397	1/12/2023	1/12/2024	\$50,000    AOP DED \$1,000

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

### CERTIFICATE HOLDER

### CANCELLATION

<b>PROOF OF COVERAGE</b>	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b>  Annette Paul/LIDR <i>Annette Paul</i>