

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2019-2020

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	DVAN ST MADIE INC ACVING	CONTACT Cindy McDaniel					
	RYAN-ST. MARIE INS AGY INC 123 Reaser Court Elyria, OH 44035	PHONE 440-322-3200 (A/C, No, Ext):	FAX (A/C, No): 440-36	6-1526			
		E-MAIL ADDRESS: cindymcdaniel@ryanstmarie.com					
		INSURER(S) AFFORDING COVERAGE		NAIC #			
1		INSURER A: Evanston Insurance Company	35378				
INSURED	SAFEHOUSE ENVIRO MDCL SAFEHOUSE SOLUTIONS, LLC 30628 Detroit Road #239	INSURER B: Erie Insurance	26271				
		INSURER C:					
	Westlake, OH 44145-5844	INSURER D:					
		INSURER E :					
		INSURER F:					
COVERAGEO DESTINO ATE NUMBER.							

COVERAGES CERTIFICATE NUMBER: 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	NSR TYPE OF INSURANCE		JBR IVD POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
Α		Υ	MKLV7ENV100028	03/19/2018	03/19/2019	EACH OCCURRENCE	\$ 1,000,000
	CLAIMS-MADE OCCUR					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 PER:					GENERAL AGGREGATE	\$ 2,000,000
	POLICY PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$ 2,000,000
	OTHER: Contractors Pollution					Each Occurrence	\$ 1,000,000
В	AUTOMOBILE LIABILITY		Q03-6930264	03//19/2018	03/19/2019	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	ANY AUTO					BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	HIRED NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
							\$
Α	✓ UMBRELLA LIAB OCCUR		MKLV7EFX100078	08/15/2018	03/19/2019	EACH OCCURRENCE	\$ 3,000,000
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$ 3,000,000
	DED RETENTION \$						\$
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		MKLV7ENV100028	03/19/2018	03/19/2019	PER OTH- STATUTE ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		Ohio Stop Gap			E.L. EACH ACCIDENT	\$ 1,000,000
						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
Α	Professional Liability		MKLV7ENV100028	03/19/2018	03/19/2019	General Aggregate Each Occurrence	\$2,000,000 \$1,000,000

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

CERTIFICATE HOLDER CANC	ELLATION

## **SAMPLE ONLY**

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

Cyrthia L. m. Doniel