Policy Number: Effective Date:

02-13-13

PROPERTY COVERAGES PROVIDED

Form: None - Contractors' Plan

DESCRIPTION OF PREMISES

Premises	Building	Construction,		
Number	Number	Occupancy and Location		
001	001	HANDYPERSON		

LIABILITY COVERAGES PROVIDED

Coverage Item	•	*	Limit of Insurance
Liability and Medical Expenses (Each Occurre	ence)		\$ 1,000,000
Medical Expenses (Any One Person)			 5,000
Damage to Premises Rented to You			 100,000
Products-Completed Operations Aggregate L	imit		 2,000,000
General Aggregate Limit (Other Than Produc	ts-Completed Op	erations)	 2,000,000

SCHEDULE OF LIABILITY CLASSIFICATIONS

Premises Number	Building Number	Classification Description	Class Code	Premium Basis¹		Rate
001	001	Handyperson	95625	24,700	PA	14.63

¹ PA = Payroll - Rate Applies Per \$1,000 of Payroll

OPTIONAL COVERAGES PROVIDED

Coverage Item				Limit of Insurance
Unscheduled Contractors' Equipment - Actual Cash Value			. Se	e CB-7105
Voluntary Property Damage			. Se	e CB-7068
ACUITY Advantages - Liability Coverages			. Se	e CB-7264
Coverage Item	Premises Number	Building Number		Limit of Insurance
Accounts Receivable	001	001	\$	1,000

BIS-PAK PLAN

Contractors

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Policy Number:

X35383

Effective Date:

02-13-13

AUDIT PERIOD

Annual

ADDITIONAL NAMED INSUREDS

WHO IS AN INSURED includes the following Additional Named Insureds:

NONE

FIRST NAMED INSURED IS:

INDIVIDUAL

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