

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE 06/13/2024

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: The Hutch Agency
121 Ferry Street, PO Box 822
Proctorville, OH 45669
License #: 3243868

INSURED: B&B Construction, LLC
55 Private Drive 1740
Chesapeake, OH 45619-7502

CONTACT: Christie Sutter
PHONE: (740) 886-7200
FAX: (740) 886-7200
E-MAIL: christie@thehutchagency.com

INSURER(S) AFFORDING COVERAGE: Motorists Mutual Insurance Company

INSURER A: Encova

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

CERTIFICATE NUMBER: 00010096-133999

REVISION NUMBER: 5

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.

TYPE OF INSURANCE	INSURANCE	POLICY NUMBER	POLICY PERIOD	LIMITS		
A	COMMERCIAL GENERAL LIABILITY	5000121051	5/13/2025	5/13/2026	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (per occurrence) MED EXP (any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMPOUND AGG	\$ 1,000,000 \$ 100,000 \$ 5,000 \$ 1,000,000 \$ 2,000,000 \$ 2,000,000
B	WORKERS COMPENSATION AND EMPLOYERS LIABILITY	WCP7007142	6/12/2025	6/12/2026	E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	\$ 100,000 \$ 100,000 \$ 500,000

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

CERTIFICATE HOLDER: City of Huntington
PO BOX 1659
Huntington, WV 25707

CANCELLATION: 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: Christie Sutter (CDS)

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Ohio Bureau of Workers' Compensation

30 W. Spring St.
Columbus, OH 43215

Certificate of Ohio Workers' Compensation

This certifies that the employer listed below participates in the Ohio State Insurance Fund as required by law. Therefore, the employer is entitled to the rights and benefits of the fund for the period specified. This certificate is only valid if premiums and assessments, including installments, are paid by the applicable due date. To verify coverage, visit www.bwc.ohio.gov, or call 1-800-644-6292.

This certificate must be conspicuously posted.

Policy number and employer: 80078070
BandB Construction LLC
PO BOX 1252
PROCTORVILLE OH 45669-1252

Period Specified Below: 07/01/2025 to 07/01/2026

www.bwc.ohio.gov
Issued by: BWC

You can reproduce this certificate as needed.

Administrator/CEO

Ohio Bureau of Workers' Compensation

Required Posting

Section 4123.54 of the Ohio Revised Code requires notice of rebuttable presumption. Rebuttable presumption means an employee may dispute or prove untrue the presumption (or belief) that alcohol, marihuana or a controlled substance not prescribed by the employee's physician is the proximate cause (main reason) of the work-related injury.

The burden of proof is on the employee to prove the presence of alcohol, marihuana or a controlled substance was not the proximate cause of the work-related injury. An employee who tests positive or refuses to submit to chemical testing may be disqualified for compensation and benefits under the Workers' Compensation Act.

Ohio Bureau of Workers' Compensation

You must post this language with the Certificate of Ohio Workers' Compensation.

DP-29 BWC-1629 (Rev. Jan. 10, 2019)



CONTRACTOR LICENSE

AUTHORIZED BY THE
West Virginia Contractor
Licensing Board

NUMBER: WV060193

CLASSIFICATION:
SPECIALTY
ROOFING
FINISHED CARPENTRY
WINDOW INSTALLATION

BANDB CONSTRUCTION LLC
DBA B & B CONSTRUCTION OF OHIO LLC
PO BOX 1252
PROCTORVILLE, OH 45669

DATE ISSUED

EXPIRATION DATE

DECEMBER 2, 2024

DECEMBER 2, 2025

Authorized Signature

Chair, West Virginia Contractor
Licensing Board

A copy of this license must be readily available for inspection by the Board on every job site where contracting work is being performed. This license number must appear in all advertisements, on all bid submissions, and on all fully executed and binding contracts. This license is non-transferable. This license is being issued under the provisions of West Virginia Code, Chapter 30, Article 42.

State of West Virginia

Certificate

I, Mac Warner, Secretary of State of the State of
West Virginia, hereby certify that

BANDB CONSTRUCTION LLC

was duly authorized under the laws of this state to transact business in West Virginia as
a foreign limited liability company on September 10, 2020.

The company is filed as an at-will company, for an indefinite period.

I further certify that the company has not been revoked or administratively dissolved by
the State of West Virginia nor has the West Virginia Secretary of State issued a
Certificate of Cancellation or Termination to the company.

Accordingly, I hereby issue this Certificate of Authorization

CERTIFICATE OF AUTHORIZATION

Validation ID:1WV7H_YHEYN



Given under my hand and the
Great Seal of the State of
West Virginia on this day of
February 16, 2024

Mac Warner

Secretary of State

