

CERTIFICATE OF LIABILITY INSURANCE

INSURED

 Ernest Hallford
 DBA Rinks Pressure Washing
 2365 Mack Dobbs Rd
 Kennesaw GA 30152

PRODUCER

 Tony Whiddon Insurance Agency (8787)
 3105 Creekside Village Dr Ste 601
 Kennesaw GA 30144

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).

COVERAGES

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	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL <input type="checkbox"/> CLAIMS <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S <input type="checkbox"/> _____	TBD, Quote # WGL-78239	5/13/2016	5/13/2017	GENERAL AGGREGATE	200000
				PRODUCTS-COMP/OP	100000
				PERSONAL & ADV INJURY	100000
				EACH OCCURRENCE	100000
				FIRE DAMAGE (Any One)	50000
				MED EXP (Any One)	5000
AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> _____				COMBINED SINGLE LIMIT	
				BODILY INJURY (per person)	
				BODILY INJURY (per accident)	
				PROPERTY DAMAGE	
GARAGE LIABILITY <input type="checkbox"/> DEALER <input type="checkbox"/> NON-DEALER <input type="checkbox"/> _____				COMBINED SINGLE LIMIT	
				BODILY INJURY (per person)	
				BODILY INJURY (per accident)	
				PROPERTY DAMAGE	
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA				EACH OCCURRENCE	
				AGGREGATE	
WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR / <input type="checkbox"/> INC PARTNERS / <input type="checkbox"/> EXC EXECUTIVE				WC STATU- OTH	- -
				EL EACH ACCIDENT	
				EL DISEASE-POLICY	
				EL DISEASE-EA	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / SPECIAL ITEMS
CERTIFICATE HOLDER

 Ernest Hallford

 2365 Mack Dobbs Rd.

 Kennesaw, GA 30152

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 of the INSURED
