

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/17/2023

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

	ne terms and conditions of the policy ertificate holder in lieu of such endor				ndorsei	ment. A stat	ement on th	is certificate does not co	onfer r	ights to the	
PRODUCER						CONTACT NAME: Phyllis Pirko					
Strategic Insurance Services LLC						PHONE (705) 010 1000					
4501 Mainlands Blvd. W						(A/C, No, Ext): (727) 213-1890 (A/C, No): E-MAIL ADDRESS: COI@getstrategicins.com					
Pinellas Park, FL 33782											
						INSURER(S) AFFORDING COVERAGE NAIC #					
INSURED						INSURER A: Heritage Property and Casualty Ins 14407					
The Gutter Company of Florida, LLC					INSURER B: Mercury 11201						
dba The Gutter Company and The Construction Company					INSURER C:						
200 Tower Drive Ste A					INSURER D :						
					INSURER E :						
	dsmar, FL 34677				INSURER F:						
			NUMBER:	REVISION NUMBER:							
C E	IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	PERT POLI	REME TAIN,	NT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE							
INSR LTR	TYPE OF INSURANCE		WVD	POLICY NUMBER	CY NUMBER		POLICY EXP (MM/DD/YYYY)	LIMITS		-	
A	GENERAL LIABILITY	Х	Х	HCR005069		5/30/2023	5/30/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,00	00,000	
	X COMMERCIAL GENERAL LIABILITY					P			\$300,	,000	
	CLAIMS-MADE X OCCUR							MED EXP (Any one person)	\$10,0	000	
								PERSONAL & ADV INJURY	\$1,00	00,000	
								GENERAL AGGREGATE	\$2,000,000		
GEN'L AGGREGATE LIMIT APPLIES PER:								PRODUCTS - COMP/OP AGG	\$2,00	00,000	
	X POLICY PRO- JECT LOC								\$		
В	B AUTOMOBILE LIABILITY			BA090000014982		2/4/2023	2/4/2024	COMBINED SINGLE LIMIT (Ea accident)	\$300,000		
	ANY AUTO			0.000				BODILY INJURY (Per person)	\$	~	
	X ALL OWNED X SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$		
	HIRED AUTOS NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)	\$		
	AUTOS							(Per accident)	\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$	1						AGGREGATE	\$		
	WORKERS COMPENSATION							WC STATU- TORY LIMITS ER	Ψ		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE Y / N							TORY LIMITS ER	\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A									
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE			
C	DESCRIPTION OF OPERATIONS below	-						E.L. DISEASE - POLICY LIMIT			
C								II.			
DES	│ CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	I FS (Attach	ACORD 101 Additional Remarks	Schodulo	if more enace is	required)				
								ontract			
	Certificate Holder is named additional insured on the General Liability as per written contract.										
CE	RTIFICATE HOLDER				CANCELLATION						
PROOF OF INSURANCE						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE					
PROOF OF INSURANCE								EREOF, NOTICE WILL E			
PR	OOF OF INSURANCE					ACCORDANCE WITH THE POLICY PROVISIONS.					
					AUTHO	DIZED DEDDESE	ALT A TIL C				

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Doug Levi