

TBENNETT

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/10/2022

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.

lf th	SUBROGATION IS WAIVED, subject is certificate does not confer rights to	ct to the	the certi	terms and conditions of ificate holder in lieu of su	the pol	licy, certain orsement(s)	policies may	require an endorsemen	t. As	tatement on	
PRODUCER Brunswick Insurance Agency, Inc.						CONTACT Teresa Bennett NAME: PHONE FAX					
						NAME: PHONE (A/C, No, Ext): (A/C, No):					
5309 Transportation Blvd Cleveland, OH 44125					E-MAIL ADDRESS: tbennett@brunswickcompanies.com						
Oleveland, Off 44125						INSURER(S) AFFORDING COVERAGE NAIC #					
								e Companies		22292	
INSURED Speedie Recovery of South Florida 8041 Mainline Pkwy.						RB:					
						INSURER C:					
						RD:					
Fort Myers, FL 33912					INSURE						
					INSURE						
COVERAGES CERTIFICATE NUMBER:						REVISION NUMBER:					
IN C	HIS IS TO CERTIFY THAT THE POLICIE DICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY KCLUSIONS AND CONDITIONS OF SUCH	EQUI PER	REME TAIN,	ENT, TERM OR CONDITION THE INSURANCE AFFORM	N OF A	NY CONTRAC	CT OR OTHER IES DESCRIB	R DOCUMENT WITH RESPE ED HEREIN IS SUBJECT T	CT TC	WHICH THIS	
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
	COMMERCIAL GENERAL LIABILITY					······	,,	EACH OCCURRENCE	\$		
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$		
								MED EXP (Any one person)	\$		
								PERSONAL & ADV INJURY	\$		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$		
	POLICY PRO- LOC							PRODUCTS - COMP/OP AGG	\$		
	OTHER:								\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO							BODILY INJURY (Per person)	\$		
	OWNED AUTOS ONLY SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$		
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
									\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$							PER OTH-	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$		
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE			
٨	DESCRIPTION OF OPERATIONS below Fidelity / Crime			1062202		3/31/2022	3/31/2023	E.L. DISEASE - POLICY LIMIT Client Property	\$	1,000,000	
^	ridenty / Grinic			1002202		0/01/2022	0,01,2020	One in Frequency		1,000,000	
DES This \$100	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC Fidelity / Crime Coverage Policy is writ ,000 is held by Allied Finance Adjusters	LES (#ten fo	ACORE or a T	 D 101, Additional Remarks Schedu Driver Year Term, billed on nce, Inc. as applicable laws	le, may b an ann s will al	e attached if mor ual basis unti ow	l re space is requii il renewed or	red) cancelled prior. The reter	ntion /	deductible of	
CE	RTIFICATE HOLDER				CANC	ELLATION					
For Informational Purposes 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 J. J					