

## CERTIFICATE OF LIABILITY INSURANCE

**DATE (MM/DD/YYYY)**7/3/2018

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).

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PRODUCER						CONTACT NAME: Bianca Morales					
Rocky Mountain Insurance Specialists						PHONE FAX					
2175 S. Jasmine St.						(A/C, No, Ext): (A/C, No): E-MAIL ADDRESS: bmorales@insuranceaai.com					
Ste. 109						INSURER(S) AFFORDING COVERAGE				NAIC #	
Denver CO 80222						INSURER A: Security National Ins				19879	
INSURED						INSURER B:					
Mike Pentel DBA: Northstar Painting and Remodeling						INSURER C:					
3808 S Eagle St.				INSURI		ISURER D:					
					INSURER E :						
	Aurora	CO 80014			INSURER F:						
CO	/ERAGES CER	TIFIC	TFICATE NUMBER:			REVISION NUMBER:					
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.											
INSR LTR TYPE OF INSURANCE			SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
X COMMERCIAL GENERAL LIABILITY						, , ,,,,,,	· · · · · · · · · · · · · · · · · · ·	EACH OCCURRENCE	\$	1,000,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED	\$	100,000	
									\$	5,000	
A		Y		NA109982302		02/13/2018	02/13/2019	` ' ' '	\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000	
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	2,000,000	
	OTHER:								\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO							'	\$		
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	7.0.00 0.12.							'	\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$	Ī							\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER			
ANV PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below								E.L. EACH ACCIDENT	\$		
								E.L. DISEASE - EA EMPLOYEE	\$		
								E.L. DISEASE - POLICY LIMIT	\$		
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHIC	CLES (	ACORI	D 101, Additional Remarks Sched	ule, may	be attached if me	ore space is requ	uired)			
A	ssured Property Management is	Add	ition	al Insured in regards	to the	General L	iahility ner	written contract			
Assured Property Management is Additional Insured in regards to the General Liability per written contract											
CEF	TIFICATE HOLDER			CANC	CANCELLATION						
Assured Property Management						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					
						Bianca Morales					
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