

CERTIFICATE OF LIABILITY INSURANCE

OP ID DV

07/18/11

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(les) 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).

PRODUCER	CUNTACT NAME:				
Robertson Ryan & Assoc., Inc. Two Plaza East, Suite 650 330 East Kilbourn Avenue Milwaukee WI 53202	PHONE (A/C, No, Ext): E-MAIL ADDRESS: PRODUCER CHOOLING				
Phone:414-271-3575 Fax:414-271-0196	CUSTOMER ID #: CROWN - 4 INSURER(S) AFFORDING COVERAGE	NAIC #			
INSURED	INSURER A: Philadelphia Indemnity	18058			
Crown Services Inc Suite 120	INSURER B: American Zurich Ins Co				
2800 Corporate Exchange Drive Columbus OH 43231	INSURER C:				
COLUMBED ON 15251	INSURER D:				
	INSURER E:				
	INSURER F:				

						INSURER E :							
						INSURER F:							
COVERAGES CERTIFICATE NUMBER:						REVISION NUMBER:							
IN C	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. ISR POLICY FEF POLICY EXP												
INSR	TYPE OF INSURANCE		INSR	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS					
	GENERAL LIABILITY		and the second	PHPK666323	РНРК666323	01/01/11	01/01/12	EACH OCCURRENCE DAMAGE TO RENTED	\$1000000				
A	X	X COMMERCIAL GENERAL LIABILITY						PREMISES (Ea occurrence)	s 100				
	CLAIMS-MADE X OCCUR							MED EXP (Any one person)	\$ 500				
		GEN'L AGGREGATE LIMIT APPLIES PER.						PERSONAL & ADV INJURY	s 1000000				
								GENERAL AGGREGATE	\$ 2000000				
							PRODUCTS - COMP/OP AGG	\$ 200	0000				
	X	POLICY PRO. LOC							\$				
	X	ANY AUTO	donesia de la companya de la company	PHPK666323	01/01/11	01/01/12	COMBINED SINGLE LIMIT (Ea accident)	\$ 100	0000				
^	<u> </u>						BODILY INJURY (Per person)	\$					
	-	ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$				
		SCHEDULED AUTOS HIRED AUTOS				SSI COLORISION AND CO		PROPERTY DAMAGE (Per accident)	s				
		NON-OWNED AUTOS			9				S				
									\$				
A	X	UMBRELLA LIAB X OCCUR		PHUM331340	PHUM331340	01/01/11	01/01/12	EACH OCCURRENCE	\$ 700	0000			
		EXCESS LIAB CLAIMS-MADE	Œ				AGGREGATE	\$ 700	0000				
		DEDUCTIBLE							\$				
	X	RETENTION \$ 10000							\$				
B		ORKERS COMPENSATION ND EMPLOYERS' LIABILITY			WC929936610	01/01/11	01/01/12	X WC STATU- TORY LIMITS ER					
	ANY	PROPRIETOR/PARTNER/EXECUTIVE	NIA					E.L. EACH ACCIDENT	\$ 100	0000			
	(Ma.	(Mandatory in NH)					E.L. DISEASE - EA EMPLOYEE	\$ 100	0000				
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	s 100	0000			
								<u> </u>		2000000			
Te	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Temporary Employment Service												
CEF	CERTIFICATE HOLDER CANCELLATION												
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SAMPLE ONLY

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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

WAYNH. Aluman.

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