

CERTIFICATE OF LIABILITY INSURANCE

OPID PLC1

DATE (MM/DD/YYYY)

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).

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PRODUCER	CONTACT NAME:	
Creech & Stafford Ins Agcy Inc	PHONE FAX (A/C, No, Ext): (A/C, No):	
210 Malabu Drive, Suite 200	E-MAIL ADDRESS:	
Lexington KY 40502-3252	PRODUCER CUSTOMER ID #: ZKBCO-1	
Phone:859-253-1371 Fax:859-233-9831	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED	INSURER A: Ohio Casualty	24074
ZKB Service LLC. 115 MacArthur Ct	INSURER B:	
Nicholasville KY 40356	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	
COVER A CEC.	DEVICION 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	ADDL INSR		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
A	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY		CBP7043273	07/13/13	07/13/14	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1000000 \$ 100000
	CLAIMS-MADE X OCCUR		0217010270	017,207,20	07, 20, 21	MED EXP (Any one person)	\$ 5000
						PERSONAL & ADV INJURY	\$ 1000000
						GENERAL AGGREGATE	\$ 200000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG	\$ 200000
	POLICY PRO- JECT LOC						\$
_	AUTOMOBILE LIABILITY		D11003400			COMBINED SINGLE LIMIT (Ea accident)	\$ 1000000
Α	X ANY AUTO		BA1003482	10/16/13	10/16/14	BODILY INJURY (Per person)	\$
	ALL OWNED AUTOS					BODILY INJURY (Per accident)	\$
	SCHEDULED AUTOS HIRED AUTOS					PROPERTY DAMAGE (Per accident)	\$
	NON-OWNED AUTOS						\$
							\$
	UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$
	DEDUCTIBLE						\$
	RETENTION \$						\$
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		52004334	10/30/13	10/30/14	X WC STATU- TORY LIMITS OTH- ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A				E.L. EACH ACCIDENT	\$ 100000
	(Mandatory in NH)	.,,				E.L. DISEASE - EA EMPLOYEE	\$ 100000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 500000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER	CANCELLATION
LFUCG-2	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
LFUCG 200 E MAIN STREET	AUTHORIZED REPRESENTATIVE
LEXINGTON KY 40507	Creech & Stafford Insurance