

PARTPAI-01

CSIMONDS

9/25/2023

## **CERTIFICATE OF LIABILITY INSURANCE**

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).

tl	SUBROGATION IS WAIVED, subjecting certificate does not confer rights				ıch end	dorsement(s)		require an en	dorsemen	t. A s	tatement on	
PRODUCER Arroyo Insurance Services, Inc. 2700 E. Foothill Blvd., Suite 302 Pasadena, CA 91107						CONTACT NAME: PHONE (626) 700 0522 FAX (626) 622 6425						
						(A/C, No, Ext): (626) 799-9532 (A/C, No): (626) 623-6135						
						E-MAIL ADDRESS: carmeletteb@arroyoins.com						
						INSURER(S) AFFORDING COVERAGE INSURER A : James River Insurance Co.					NAIC#	
								12203				
Partnership Painting Inc						INSURER B : Trumbull Insurance Co.					27120	
						RC:						
	25 Fulton Ave. Pasadena, CA 91107				INSURER D : INSURER E :							
					INSURER F:							
				E NUMBER:				REVISION NU				
IN C	HIS IS TO CERTIFY THAT THE POLICI IDICATED. NOTWITHSTANDING ANY I ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	REQU PER	IREMI TAIN,	ENT, TERM OR CONDITIO , THE INSURANCE AFFOR	N OF A	ANY CONTRAC Y THE POLICI	CT OR OTHER IES DESCRIB	R DOCUMENT W BED HEREIN IS S	ITH RESPE	CT TO	WHICH THIS	
INSR LTR TYPE OF INSURANCE			SUBR			POLICY EFF (MM/DD/YYYY)		LIMITS				
A	X COMMERCIAL GENERAL LIABILITY	INSD	VVVD			(IMIMI/DD/1111)	(MIM/DD/1111)	EACH OCCURRE		\$	1,000,000	
	CLAIMS-MADE X OCCUR			001444750		6/1/2023	6/1/2024	DAMAGE TO REN PREMISES (Ea oc	TED currence)	\$	50,000	
								MED EXP (Any one person)		\$	1,000	
								PERSONAL & ADV INJURY		\$	1,000,000 2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE		\$	2,000,000	
	POLICY PRO- JECT LOC							PRODUCTS - COM	MP/OP AGG	\$	2,000,000	
В	AUTOMOBILE LIABILITY							COMBINED SINGI (Ea accident)	E LIMIT	\$	1,000,000	
	X ANY AUTO			72UECHA6695		6/1/2023	6/1/2024	BODILY INJURY (Per person)		\$		
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (I	Per accident)	\$		
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMA (Per accident)		\$		
	ACTOS CIVET									\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRE	NCE	\$		
	EXCESS LIAB CLAIMS-MADE	:						AGGREGATE		\$		
	DED RETENTION \$	1								\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE	ļ						E.L. EACH ACCID		\$		
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)  If yes, describe under DESCRIPTION OF OPERATIONS below		N/A						E.L. DISEASE - EA EMPLOYEE				
								E.L. DISEASE - PO				
										,		
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (	ACORE	D 101. Additional Remarks Schedu	ıle. mav b	e attached if mor	e space is requi	red)				
CERTIFICATE HOLDER  Partnership Painting Inc 25 Fulton Ave. Pasadena, CA 91107						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						