ACORD, CERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YYYY) 01/12/2024 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE AMERICAN CONTINENTAL INSURANCE SERVICES HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR 5532 W. GRANT LINE ROAD ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. TRACY, CA 95304 PH: (925)336-3300; FX: (888)371-6061 E-MAIL - info@american-continental.com INSURERS AFFORDING COVERAGE NAIC# INSURED INSURER A: CENTURY SURETY INSURANCE COMPANY FONIER FREIGHT BROKERAGE, INC INSURER B: 4239 LUNAR WAY INSURER C: UNION CITY, CA 94587 INSURER D INSURER E **COVERAGES** 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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. POLICY EFFECTIVE DATE (MM/DD/YY) POLICY EXPIRATION DATE (MM/DD/YY) POLICY NUMBER LIMITS TYPE OF INSURANCE LTR INSRD **GENERAL LIABILITY** EACH OCCURRENCE \$1,000,000 CCP-1204854 01/09/2024 01/09/2025 DAMAGE TO RENTED PREMISES (Ea occurence) X COMMERCIAL GENERAL LIABILITY \$100,000 CLAIMS MADE | X | OCCUR MED EXP (Any one person) \$5,000 Α PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG \$ INCLUDED PRO-JECT X | POLICY AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT \$ (Ea accident) ANY AUTO ALL OWNED AUTOS **BODILY INJURY** \$ SCHEDULED AUTOS HIRED AUTOS **BODILY INJURY** \$ NON-OWNED AUTOS PROPERTY DAMAGE \$ **GARAGE LIABILITY** AUTO ONLY - EA ACCIDENT \$ ANY AUTO EA ACC \$ OTHER THAN AUTO ONLY: AGG \$ **EXCESS/UMBRELLA LIABILITY EACH OCCURRENCE** \$ OCCUR **CLAIMS MADE AGGREGATE** \$ \$ DEDUCTIBLE \$ RETENTION OTH: WORKERS COMPENSATION AND TORY LIMITS **EMPLOYERS' LIABILITY** E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under SPECIAL PROVISIONS below E.L. DISEASE - POLICY LIMIT OTHER DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS OPERATION: FREIGHT BROKER. CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION ***FOR INSURED'S REFERENCE *** DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN

CERTIFICATE HOLDER

***FOR INSURED'S REFERENCE ***

DOT 3275285
MC 1034669

DOT 3275285
AUTHORIZED REPRESENTATIVE

REPRESENTATIVE

AUTHORIZED REPRESENTATIVE

RAMAN ACTION

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION

DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN

NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL

IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR

REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

RAMAN KAILEY

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