

Guardian Insurance Company, Inc

The Guardian Building 9716 Estate Thomas, Suite 200 St. Thomas VI. 00802 www.guardianinsurance.com Facebook: @GuardianUSVI Phone: (340) 776-8050

Effective Date	Expiration Date	Type of Policy	Policy Number	Renewal Of
3/8/2021	3/8/2022	RES		

Named Insured and Mailing Address		Insured	General Information			
Raian M. Gil del Rosario 17 Casa 15 17 Casa 15 Santo Domingo PR 11802		Occupat	ion:			
		Business Phone:		(849) 848-1600		
		Mobile Phone:		(849) 848-1600		
		e-mail:				
Insured Premises		Agency				
Insured Pre						
			art Occupied by Named Insured (%) Type of Insured			
Interest of Named Insured in Insured	Premises	Part Occ	upied by Named Insured (%)	Type of Insured		
Interest of Named Insured in Insured Owner	Premises X	Part Occ	upied by Named Insured (%)	Type of Insured Individual	х	
		Part Occ	upied by Named Insured (%)		x	
Owner		Part Occ	upied by Named Insured (%)	Individual	x	
Owner General Lesee	х	Part Occ	upied by Named Insured (%)	Individual Partnership		
Owner General Lesee Tenant	X X	Part Occ	upied by Named Insured (%)	Individual Partnership Corporation	x	
Owner General Lesee Tenant	X X		Additional Information	Individual Partnership Corporation Joint Venture	X X	
Owner General Lesee Tenant Other	X X X			Individual Partnership Corporation Joint Venture	x x x	
Owner General Lesee Tenant Other Coverages	X X X Limits - Each Occu			Individual Partnership Corporation Joint Venture	x x x	
Owner General Lesee Tenant Other Coverages A - Bodily Injury Liability	X X X Limits - Each Occu			Individual Partnership Corporation Joint Venture	x x x	
Owner General Lesee Tenant Other Coverages A - Bodily Injury Liability B - Property Damage Liability	X X X Limits - Each Occu			Individual Partnership Corporation Joint Venture	x x x	
Owner General Lesee Tenant Other Coverages A - Bodily Injury Liability B - Property Damage Liability C - Products - Completed Operations	X X Limits - Each Occu 0 0 EXCLUDED			Individual Partnership Corporation Joint Venture	x x x	
Owner General Lesee Tenant Other Coverages A - Bodily Injury Liability B - Property Damage Liability C - Products - Completed Operations D - Personal and Advertising Injury	X X Limits - Each Occu 0 0 EXCLUDED			Individual Partnership Corporation Joint Venture	x x x	
Owner General Lesee Tenant Other Coverages A - Bodily Injury Liability B - Property Damage Liability C - Products - Completed Operations D - Personal and Advertising Injury E - Medical Payments	X X Limits - Each Occu 0 0 EXCLUDED			Individual Partnership Corporation Joint Venture	x x x	
Owner General Lesee Tenant Other Coverages A - Bodily Injury Liability B - Property Damage Liability C - Products - Completed Operations D - Personal and Advertising Injury E - Medical Payments	X X Limits - Each Occu 0 0 EXCLUDED			Individual Partnership Corporation Joint Venture	x x x	



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