

**Named Insured and Mailing Address** 

## **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	Quote Number	Renewal Of
3/10/2021	3/10/2022	RES		

**Insured General Information** 

Raian M. Gil del Rosario 17 Casa 15 17 Casa 15 Santo Domingo PR 11802			ion:			
			Phone:	(849) 848-1600		
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Insured Premises		Agency				
Insured Pre						
Interest of Named Insured in Insured	Premises	Part Occ	upied by Named Insured (%)	Type of Insured		
Owner				Individual		
General Lesee				Partnership		
Tenant				Corporation		
Other				Joint Venture		
				Other		
Coverages	Limits - Each Occurrence		Additional Information		Premium	
A - Bodily Injury Liability	10					
B - Property Damage Liability	10					
C - Products - Completed Operations	EXCLUDED					
D - Personal and Advertising Injury	EXCLUDED					
E - Medical Payments	\$5,000.00					
F - Fire Damage to Rented Premises	\$50,000.00					
	-		TOTAL PREMIUM	\$2,500.00		
			GROSS TAX	\$12.50		
			TOTAL PREMIUM	\$2,512.50		