

CERTIFICATE OF LIABILITY INSURANCE

ALVES-1

DATE (MM/DD/YYYY)

OP ID: JS

ATE (MM/DD/YYYY)

04/24/2018

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). CONTACT NAME: Joseph J Schipsi Inc PHONE (A/C, No, Ext): E-MAIL FAX (A/C, No): 303 S Kings Hwy Ste5 Cherry Hill, NJ 08034 ADDRESS: topfloordesigns@gmail.com Joseph J Schipsi Jr **INSURER(S) AFFORDING COVERAGE** NAIC # INSURER A: Utica National Ins Group 25976 INSURED Top Floor Design Inc INSURER B : 225 Cleveland Ave INSURER C Long Brnach, NJ 07740 INSURER D INSURER E : INSURER F **COVERAGES** CERTIFICATE NUMBER: **REVISION 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. ADDL SUBR POLICY EFF POLICY EXP (MM/DD/YYYY) TYPE OF INSURANCE LIMITS POLICY NUMBER INSR WVD GENERAL LIABILITY 1,000,000 **EACH OCCURRENCE** DAMAGE TO RENTED PREMISES (Ea occurrence) 4922178 01/15/2018 01/15/2019 A COMMERCIAL GENERAL LIABILITY Y Y 1,000,000 \$ CLAIMS-MADE OCCUR 10,000 MED EXP (Any one person) \$ X **Business Owners** 1,000,000 PERSONAL & ADV INJURY \$ 2,000,000 **GENERAL AGGREGATE** \$ 2.000,000 GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG \$ PRO-JECT POLICY S AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) ANY AUTO \$ SCHEDULED AUTOS NON-OWNED ALL OWNED AUTOS BODILY INJURY (Per accident) HIRED AUTOS \$ AUTOS \$ UMBRELLA LIAB X X 1,000,000 OCCUR **EACH OCCURRENCE** \$ EXCESS LIAB CLAIMS-MADE 4923252 01/15/2018 01/15/2019 1,000,000 AGGREGATE \$ 10000 DED X RETENTIONS WORKERS COMPENSATION X WC STATU-TORY LIMITS X OTH AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y 4922179 01/15/2018 01/15/2019 500,000 E.L. EACH ACCIDENT NIA N (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE \$ 500,000 If yes, describe under DESCRIPTION OF OPERATIONS below 500,000 E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) Britannica Floor Covering Inc. is included as additional insured on a primary and non-contributory basis including Completed Operations. P includes waiver of subrogation in favor of the certificate holder with respect to GL, WC and UMBR policies. Subcontractor agrees to Hold Harmless in favor of the certificate holder. WC coverage applies in NJ & NY.

CERTIFICATE HOLDER		CANCELLATION
Britannica Floor Covering Inc. 155 Park Avenue Amityville, NY 11701	BRITANN	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