



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/18/2025

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).

PRODUCER WOOMER Insurance 106 N Salem St. Apex NC 27502		CONTACT NAME: Lupe Koehler PHONE (A/C, No, Ext): (919)290-6000 E-MAIL ADDRESS: lupe@woomerinsurance.com FAX (A/C, No): (919)362-5661	
INSURED NC Solar Now Inc. 2509 Atlantic Avenue Raleigh NC 27604		INSURER(S) AFFORDING COVERAGE INSURER A: Builders Mutual Insurance Company INSURER B: Erie Insurance Exchange INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 10844 26271	

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PRO-JECT ☐ LOC ☐ OTHER:			CPP0067951-09	10/10/2024	10/10/2025	EACH OCCURRENCE	\$ 1000000
			DAMAGE TO RENTED PREMISES (Ea occurrence)				\$ 100000	
			MED EXP (Any one person)				\$ 5000	
			PERSONAL & ADV INJURY				\$ 1000000	
				GENERAL AGGREGATE	\$ 2000000			
				PRODUCTS - COMP/OP AGG	\$ 2000000			
							\$	
B	☐ AUTOMOBILE LIABILITY ☐ ANY AUTO ☒ OWNED AUTOS ONLY ☒ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS ONLY			Q11-1930595	11/19/2024	11/19/2025	COMBINED SINGLE LIMIT (Ea accident)	\$ 1000000
			BODILY INJURY (Per person)				\$	
			BODILY INJURY (Per accident)				\$	
			PROPERTY DAMAGE (Per accident)				\$	
							\$	
A	☒ UMBRELLA LIAB ☐ EXCESS LIAB DED RETENTION \$			MUB0004920-07	10/10/2024	10/10/2025	EACH OCCURRENCE	\$ 5000000
			CLAIMS-MADE				AGGREGATE	\$ 5000000
							\$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N ☒ Y	N / A	WCP1041654	10/10/2024	10/10/2025	☒ PER STATUTE ☐ OTH-ER	
			E.L. EACH ACCIDENT				\$ 1000000	
			E.L. DISEASE - EA EMPLOYEE				\$ 1000000	
			E.L. DISEASE - POLICY LIMIT				\$ 1000000	
A	Rented/Leased Equipment			CPP0067951-09	10/10/2024	10/10/2025	Rented/Leased Equip Deductible	\$250,000 \$1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

For Information Purposes Only

CERTIFICATE HOLDER**CANCELLATION**

For Information Purposes Only

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

Fax:

Email:

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ACORD 25 (2016/03)

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