

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/04/2024

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						CONTACT Joseph Honeycutt					
Creative Insurance Solutions						PHONE (919) 557-9085 FAX (919) 557-5670 (A/C, No): (919) 557-5670					
1321 N. Main Street						E-MAIL joe@creativeinsurancesolutions.com					
						INSURER(S) AFFORDING COVERAGE				NAIC #	
Fuquay Varina NC 27526					INSURER A: Owners Insurance Company				32700		
INSURED						INSURER B : UCPM					
Lynn Environmental Consulting Inc					INSURER C :						
7713 Pegram St # 7594					INSURER D :						
					INSURER E :						
	Willow Spring NC 27592-7594					INSURER F :					
CO\	COVERAGES CERTIFICATE NUMBER: CL241417122					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			POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE \$	1,00	0,000	
								DAMAGE TO RENTED PREMISES (Ea occurrence) \$	300,	000	
								MED EXP (Any one person) \$	10,0	00	
A				35497216		08/24/2023	08/24/2024	PERSONAL & ADV INJURY \$	4 00	0,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE \$	0.00	0,000	
								PRODUCTS - COMP/OP AGG \$	0.00	0,000	
	OTHER:							\$			
								COMBINED SINGLE LIMIT (Ea accident)			
	ANY AUTO							BODILY INJURY (Per person) \$			
	OWNED SCHEDULED							BODILY INJURY (Per accident) \$			
	AUTOS ONLY AUTOS HIRED NON-OWNED							PROPERTY DAMAGE			
	AUTOS ONLY AUTOS ONLY							(Per accident)			
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE \$			
	EXCESS LIAB CLAIMS-MADE							AGGREGATE \$			
								AGGREGATE \$			
	DED RETENTION \$ WORKERS COMPENSATION							PER OTH-			
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE										
	OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT \$			
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE \$			
		$\left \right $		<u> </u>				E.L. DISEASE - POLICY LIMIT \$			
в	Pollution Liability			ECPENV04977		08/24/2023	08/24/2024	Limit/deductible	500,	000/2,500	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)											
CERTIFICATE HOLDER CANCELLATION											
Ashlay Baskar					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
Ashley Becker											
1	145 Stonemason Drive				AUTHO	RIZED REPRESE	NTATIVE				
Holly Springs			NC 27540			South Shun					

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