



AUTHORIZATION TO OPERATE (ATO)

Lot 45 - 129 Calebs Corner PL. Spring Lake, NC 28390

PROPERTY ADDRESS

The system at the above referenced address was installed in accordance with applicable laws, rules and permit conditions.



9/19/24

DATE OF ATO

Matthews Backhoe Service

INSTALLER

THOMAS BOYCE, AOWE

OWNER/REPRESENTATIVE

CERTIFICATE OF LIABILITY INSURANCE

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).

INSURED NAME AND ADDRESS
 JASON E MATTHEWS
 DBA MATTHEWS BACKHOE SERVICE
 PO BOX 231
 KIPLING NC 27543

CERTIFICATE HOLDER
 MARLIN SEPTIC TANK CLEANING,
 INSPECTIONS, INTALLATION AND REPAIR
 140 KNOX LN
 WEST END, NC 27376

 info@mseptic.com

COVERAGES

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.

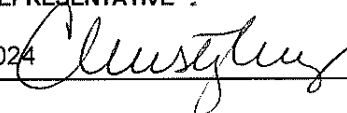
X	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
<input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY - OCCURRENCE GEN'L AGGREGATE APPLIES PER POLICY			GL 0475013	08/01/2024	08/01/2025	GENERAL AGGREGATE	\$2,000,000
							PRODUCTS - COMP/OPS AGGREGATE	\$2,000,000
							PERSONAL & ADV INJURY	\$1,000,000
							EACH OCCURRENCE	\$1,000,000
							DAMAGE TO RENTED PREMISES (Ea Occurrence)	\$100,000
							MED EXP (Any one person)	\$5,000
<input type="checkbox"/>	BUSINESSOWNERS						EACH OCCURRENCE	\$
							AGGREGATE	\$
<input checked="" type="checkbox"/>	AUTOMOBILE LIABILITY			BAP 2907719	04/18/2024	04/18/2025	COMBINED SINGLE LIMIT (Each accident)	\$500,000
<input checked="" type="checkbox"/>	SCHEDULED AUTOS						BODILY INJURY (Per person)	\$
<input checked="" type="checkbox"/>	HIRED AUTOS						BODILY INJURY (Per accident)	\$
<input checked="" type="checkbox"/>	NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
<input type="checkbox"/>	GARAGE LIABILITY							
<input type="checkbox"/>	(Other)							
<input type="checkbox"/>	EXCESS LIABILITY - OCCURRENCE						EACH OCCURRENCE	\$
							AGGREGATE	\$
<input checked="" type="checkbox"/>	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY POLICY APPLIES TO THE WORKERS COMPENSATION LAW IN THE STATE OF NC	N/A		WC 0232325	08/24/2024	08/24/2025	WC STATUTORY LIMITS	
							E.L. EACH ACCIDENT	\$1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$1,000,000
							E.L. DISEASE - POLICY LIMIT	\$1,000,000
<input type="checkbox"/>	OTHER:							

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES:

CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

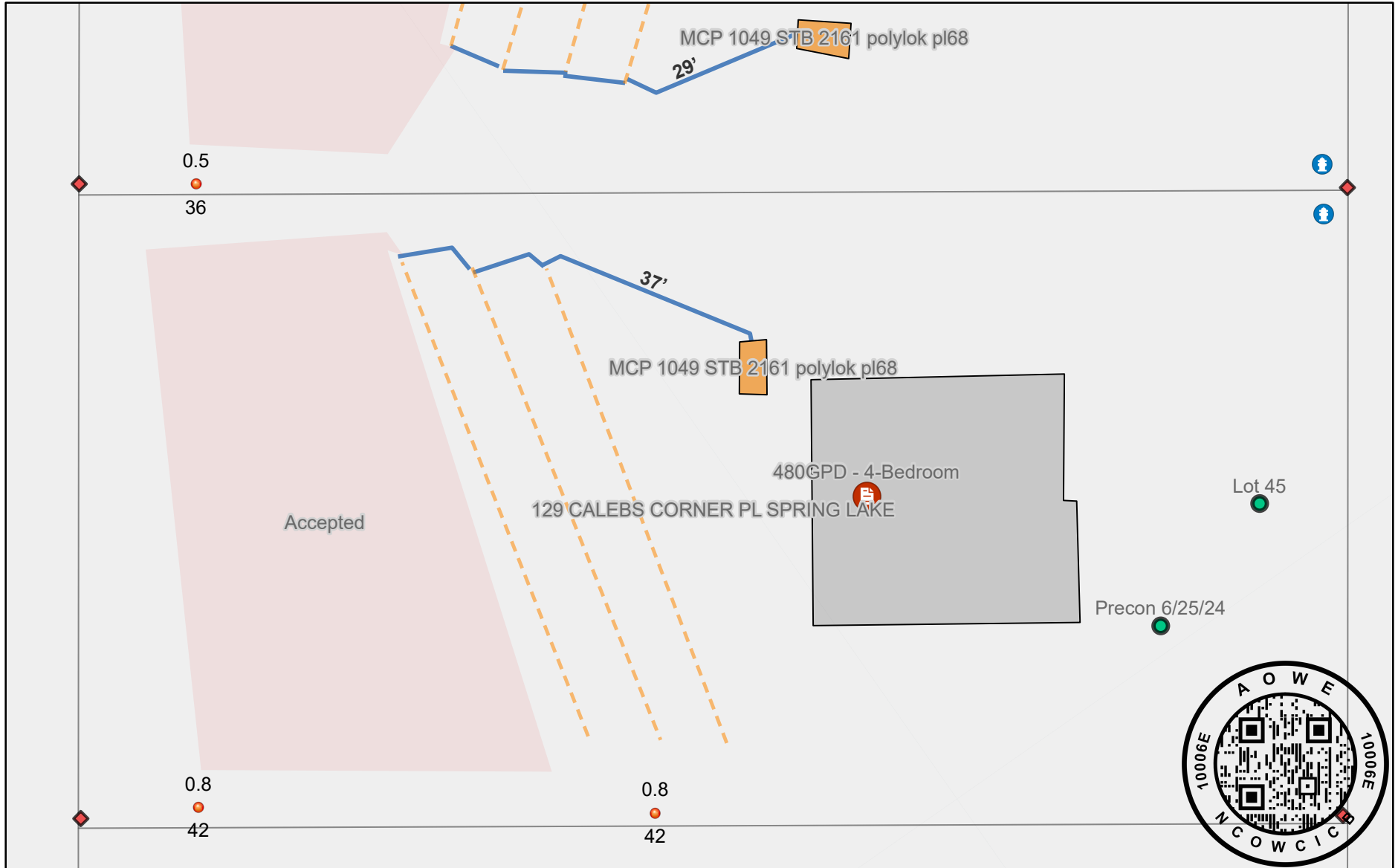
AUTHORIZED REPRESENTATIVE

DATE 09/10/2024



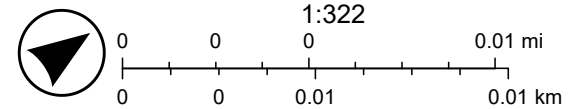


Lot 45 - 129 Calebs Corner PL. 2024



9/19/2024

- Borings
- Point Generic
- Existing Leach Lines
- Line Generic
- Water Meter
- House Box
- ◆ Property Boundary Marker
- Accepted
- Parcels
- Polygon Generic



Esri Community Maps Contributors, County of Cumberland, State of North Carolina DOT, © OpenStreetMap, Microsoft, Esri, TomTom, Garmin,

Signature Certificate

Reference number: G5NRY-UGOJJ-G97VP-PXWL5

Signer

Jonathan Kiger

Email: jhkiger@drhorton.com

Sent:

Viewed:

Signed:

Timestamp

19 Sep 2024 19:19:47 UTC

19 Sep 2024 19:27:58 UTC

23 Sep 2024 17:33:52 UTC

Signature



Recipient Verification:

✓ Email verified

19 Sep 2024 19:27:58 UTC

IP address: 174.245.88.151

Location: Charlotte, United States

Document completed by all parties on:

23 Sep 2024 17:33:52 UTC

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