

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/2/2023

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).

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PRODUCER		CONTACT NAME: Yesenia Garza			
Bethany Insurance Agency Inc		[(A/C, NO, EXI). \	305-0087		
279 E ARROW HWY STE 101		E-MAIL ADDRESS: clrequest@bethanyins.com			
		INSURER(S) AFFORDING COVERAGE	NAIC#		
SAN DIMAS,	CA 91773	INSURER A: ASSOCIATED INDUSTRIES INS.CO. INC.	23140		
INSURED		INSURER B: INFINITY SELECT INS CO	20260		
G.B.R. Construction & Property Services, Inc		INSURER C: NATIONAL LIABILITY & FIRE INS. CO	20052		
DBA: GBR Paving		INSURER D: NAVIGATORS INSURANCE COMPANY	42307		
12711 McKinley Ave		INSURER E:			
Chino	CA 91710	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.

INSR LTR		TYPE OF INSURANCE	ADDL		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	rs	
A	X	CLAIMS-MADE X OCCUR						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000 100,000
								MED EXP (Any one person)	\$	5,000
					AES1220420 00	02/26/2023	02/26/2024	PERSONAL & ADV INJURY	\$	1,000,000
	GEN	L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000
		POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000
		OTHER:							\$	
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
		ANY AUTO						BODILY INJURY (Per person)	\$	
В		OWNED AUTOS ONLY SCHEDULED AUTOS			504610152004001	02/12/2023	02/12/2024	BODILY INJURY (Per accident)	\$	
	X	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
								,	\$	
		UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$	
		CLAIMS-MADE						AGGREGATE	\$	
		DED RETENTION \$]						\$	
		KERS COMPENSATION EMPLOYERS' LIABILITY						X PER STATUTE OTH-		
	ANY	PROPRIETOR/PARTNER/EXECUTIVE Y/N CER/MEMBER EXCLUDED?	N/A		V9WC398265	08/09/2022	08/09/2023	E.L. EACH ACCIDENT	\$	1,000,000
	(Man	datory in NH)	"		V 9 W C 398203	08/09/2022	06/09/2023	E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	If yes	, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
								Limit		\$50,000
D	In	and Marine			04-1M041582	10/02/2022	10/02/2023			
L	DESCRIPTION OF OPENATIONS / OCCUPING / VEHICLES / OCCUPING / Additional Demarks School to many he stocked if many area is assuring.)									

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

CERTIFICATE HOLDER	CANCELLATION			
PROOF OF INSURANCE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	AUTHORIZED REPRESENTATIVE			
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Varanta Cama			
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Yesenia Garza			