

CERTIFICATE OF LIABILITY INSURANCE

PUREA-1

OP ID: HH

DATE (MM/DD/YYYY) 07/23/13

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).

Certifica	ite noider in neu or such end	orsemenu(s).			
PRODUCER Edison Insurance Agency, Inc. 3835 Palm Beach Boulevard #A Fort Myers, FL 33916		239-693-0400			
		239-693-2522	PHONE (A/C, No, Ext): FAX (A/C, No):		
			E-MAIL ADDRESS:		
			INSURER(S) AFFORDING COVER.	AGE	NAIC#
			INSURER A: Old Dominion Insurance Co	ompany 40	231
INSURED	Crothers Cooling & He	ating Inc	INSURER B: Normandy Harbor Insurance	e Comp	
	dba Pure Air Inc. 2043 Trade Center Wa	ı	INSURER C:		
	Naples, FL 34109	•	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.

INSR LTR	TYPE OF INSURANCE	ADDL SU	BR POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMITS	S
	GENERAL LIABILITY	IIIOR II				EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000
Α	X COMMERCIAL GENERAL LIABILITY		MPG8657B	07/16/13	07/16/14	PREMISES (Ea occurrence)	\$ 500,000
	CLAIMS-MADE X OCCUR					MED EXP (Any one person)	\$ 10,000
						PERSONAL & ADV INJURY	\$ 1,000,000
	X Hired & NO auto I					GENERAL AGGREGATE	\$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG	\$ 2,000,000
	X POLICY PRO- JECT LOC						\$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO					BODILY INJURY (Per person)	\$
	ALL OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	HIRED AUTOS NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$
							\$
	UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$
	DED RETENTION \$						\$
	B WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below				04/25/14	X WC STATU- TORY LIMITS OTH- ER	
В			NHFL131424	04/25/13		E.L. EACH ACCIDENT	\$
						E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$

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

A/C Systems or equip (no LPG work)

CERTIFICATE HOLDER	CANCELLATION
CERTIFICATE HULDER	CANCELLATION

COLL051

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

Collier County Growth Mgmt Division Contractor Licensing F252-2469 2800 N Horseshoe Drive

Naples, FL 34104

AUTHORIZED REPRESENTATIVE

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