

CERTIFICATE OF LIABILITY INSURANCE

FLOOR-4 OP ID: V1

07/25/2016

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).

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PRODUCER Insurance Solutions		CONTACT Wes Ingram					
8930 W Tr	opicana Ave Ste 6	PHONE (A/C, No, Ext): 702-631-0878 FAX (A/C, No): 702	-631-0561				
Las Vegas, NV 89147 Wes Ingram		E-MAIL ADDRESS:					
		INSURER(S) AFFORDING COVERAGE	NAIC #				
		INSURER A: Mt. Hawley Insurance Co.	37974				
INSURED	FKF Corporation DBA: Best of Show Construction Floorworks 2931 Lamb Ave. Las Vegas, NV 89115	INSURER B : AmTrust Ins Company of Kansas	15954				
		INSURER C: Benchmark Insurance Companies	41394				
		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 S	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMITS	S	
A	Х	COMMERCIAL GENERAL LIABILITY	INSD	WVD	TOLIST NOMBER	(MINI/DD/1111)	(MINIOD) I I I I	EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR			MGL0183260	11/11/2015	11/11/2016	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	50,000
								MED EXP (Any one person)	\$	5,000
								PERSONAL & ADV INJURY	\$	1,000,000
	GEN	L'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000
		POLICY X PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000
		OTHER:							\$	
	X ANY AUTO				KPP102310000	03/04/2016	03/04/2017	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
В								BODILY INJURY (Per person)	\$	
		ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
	X	HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
									\$	
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$	
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	
		DED RETENTION \$							\$	
C	(Mandatory in NH)				BWC160366-02	04/14/2016	04/14/2017	X PER OTH- STATUTE ER		
			N/A					E.L. EACH ACCIDENT	\$	1,000,000
								E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	1,000,000

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

Re: Evidence of Insurance

Subject to policy terms, conditions and exclusions.

CERTIFICATE HOLDER	CANCELLATION
CERTIFICATE HULDER	CANCELLATION

FKF Corporation dba Floorworks dba Best of Show Construction 2931 N. Lamb Blvd Las Vegas, NV 89115 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

Wes Ingram

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