

CERTIFICATE OF LIABILITY INSURANCE

08/01/2018

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).

CONTACT												
1935	UCE					CONTACT Alex PHONE 206 002 4302 FAX 425 430 1145						
Alexandre Lamberg Agency							(A/C, No, Ext): 200-992-4392 (A/C, No): 423-430-1143					
823 3rd Ave Ste 207							ADDITEGO.					
Seattle WA 98104						INSURER(S) AFFORDING COVERAGE INSURER A: Security National Insurance Company				19879		
INSURED						INSURER B:				10070		
Intrafurniture Trading Group, LLC, DBA: INTRA FLOORING CONSTRUCTION							INSURER C:					
24225 115th Place SE						INSURER D:						
						INSURER E :						
Kent					WA 98030	ISURER F :						
COVERAGES CER			TIFICATE 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 PER INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TEREXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.										WHICH THIS		
INSR LTR TYPE OF INSURANCE			ADDL	DL SUBR SD WVD POLICY NUMBER			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
-110	X	COMMERCIAL GENERAL LIABILITY	INSD	WVD	TOLIOT ROMDER		(MINI/DD/TTTT)	(Intellibrial Line)	EACH OCCURRENCE	\$	1,000,000	
		CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000	
									MED EXP (Any one person)	\$	5,000	
Α					NA115917702		06/01/2018	06/01/2019	PERSONAL & ADV INJURY	\$	1,000,000	
	GEN	L'L AGGREGATE LIMIT APPLIES PER:		4					GENERAL AGGREGATE	\$	2,000,000	
	X	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	1,000,000	
		OTHER:								\$		
	AUT	OMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
		ANY AUTO							BODILY INJURY (Per person)	\$		
		OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$		
		AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
										\$		
		UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
		EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	WOR	DED RETENTION \$ KERS COMPENSATION							PER OTH-	\$		
AND EMPLOYERS' LIABILITY Y/N									STATUTE ER			
OFFICER/MEMBER EXCLUDED?			N/A						E.L. EACH ACCIDENT	\$		
	(Mandatory in NH) If yes, describe under			•			E.L. DISEASE - EA EMPLOYEE		\$	2		
	DÉS	CRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)												
Contractor working in King, Snohomish, Pierce Counties installing mirrors, pictures, closet organizer.												
		IAATE IIA. BEB										
CERTIFICATE HOLDER							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						
							Alexandre Lamberg					