

CERTIFICATE OF INSURANCE

- THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY -CERTIFICATE HOLDER COPY

NAME AND NUMBER OF AGENCY APPOMATTOX INS & FINANCIAL INC 49 S MARKET ST

DD1098

804-862-1585

05/30/2019

NAME AND ADDRESS OF CERTIFICATE HOLDER

PETERSBURG , VA 23803-4214 NAME AND ADDRESS OF NAMED INSURED

> A 1 DOOR BARBER MTV INC D/B/A * 7741 WHITEPINE RD N CHESTERFIELD VA 23237-2212

STEPHANIE BARBER 7741 WHITEPINE RD N CHESTERFIELD VA 23237-

This is to certify that policies, as indicated by Policy Number below, are in force for the Named Insured at the time that the certificate is being issued.

DATE ISSUED

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPINATION DATE	LII	NITS OF INSURANCE	-
GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY	Q423051399	06/30/2019	06/30/2020	EACH OCCURRENCE	\$ 2000000	<u>ing still bernest i kommunius dis</u>
OCCURRENCE FORM GEN'L AGGREGATE LIMIT APPLIES				FIRE DAMAGE (Any one premises)	\$ 2000000	
PER: PROJECT				MED EXP (Any one person)	\$ 5000	
				PERSONAL & ADV INJURY	\$ 2000000	
				GENERAL AGGREGATE	\$ 4000000	
				PRODUCTS-COMP/OP AGG	\$ 4000000	
				DODILY IN U.S.Y.		
AUTOMOBILE LIABILITY ANY AUTO (OWNED, HIRED, NON-OWNED)	Q063040189	06/30/2019	06/30/2020	BODILY INJURY (EACH PERSON) BODILY INJURY (EACH ACCIDENT)	\$	
				PROPERTY DAMAGE	\$	
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$ 1000000	
EXCESS LIABILITY OCCURRENCE FORM	Q303070569	06/30/2019	06/30/2020	EACH OCCURRENCE	5000000	
				AGGREGATE	5000000	
WORKERS COMPENSATION	Q908000382	06/30/2019	06/30/2020	STATUTORY		
AND EMPLOYERS LIABILITY DESCRIPTION OF OPERATIONS/LOCA		**		BODILY ACCIDENT INJURY DISEASE BY DISEASE	\$ 1000000 \$ 1000000	EACH ACCIDENT POLICY LIMIT EACH EMPLOYEE

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

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.

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).

THIS CERTIFICATE IS ISSUED FOR INFORMATION PURPOSES ONLY AND CONFERS NO RIGHTS ON THE CERTIFICATE HOLDER. IT DOES NOT AFFIRMATIVELY OR NEGATIVELY LIST, AMEND, EXTEND OR OTHERWISE ALTER THE TERMS, EXCLUSIONS AND CONDITIONS OF INSURANCE COVERAGE CONTAINED IN THE POLICY(IES) INDICATED ABOVE. THE TERMS AND CONDITIONS OF THE POLICY(IES) GOVERN THE INSURANCE COVERAGE AS APPLIED TO ANY GIVEN SITUATION. LIMITS SHOWN MAY HAVE BEEN REDUCED BY CLAIMS PAID. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER AND CERTIFICATE HOLDER.

ERIE INSURANCE

SEE REVERSE SIDE

AUTHORIZED BEPRESENTATIVE Marc Cipiani