



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/17/2023

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).

Table with columns for PRODUCER, CONTACT NAME, PHONE, FAX, E-MAIL ADDRESS, INSURER(S) AFFORDING COVERAGE, and NAIC #.

COVERAGES CERTIFICATE NUMBER: 2023-2024 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.

Main table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF, POLICY EXP, LIMITS.

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

Certificate Holder is included as an Additional Insured to the above captioned General Liability, Business Auto, and Umbrella Policies on a primary and non-contributory basis for work the insured is performing provided a written contract exists requiring such a status.

CERTIFICATE HOLDER

CANCELLATION

Table with two columns: CERTIFICATE HOLDER and CANCELLATION.



ADDITIONAL REMARKS SCHEDULE

AGENCY Provident Protection Plus Incorporated		NAMED INSURED Stewart Builders, LLC & Stewart Environmental Remediation Limited Liability	
POLICY NUMBER _____		EFFECTIVE DATE: _____	
CARRIER _____	NAIC CODE _____		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance: Notes

Contractors Pollution Each Pollution Condition: \$1,000,000
 Contractors Pollution Liability Aggregate: \$2,000,000
 Transportation Pollution Liability Each Pollution Event: \$1,000,000
 Transportation Pollution Liability Aggregate: \$2,000,000
 Professional Liability Each Wrongful Act: \$1,000,000
 Professional Liability Aggregate: \$2,000,000
 Environmental Impairment Liability Each Pollution Condition: \$1,000,000
 Environmental Impairment Liability Aggregate: \$1,000,000

Deductible for General Liability Each Occurrence: \$500
 Deductible Contractors Pollution Liability Each Pollution Condition: \$5,000
 Deductible Transportation Pollution Liability Each Pollution Event: \$5,000
 Deductible Professional Liability Each Wrongful Act: \$5,000
 Deductible Environmental Impairment Liability Each Pollution Condition: \$5,000