



# Flexcor Construction Services



## CAPABILITY STATEMENT

8250 Vickers Street  
Suite E  
San Diego, CA 92111

P: (858) 276-7019  
F: (888) 909-4647

Contact:  
Chad Mitten  
P: (858) 518-9959  
E: chad@flexcorbuilders.com

[www.flexcorbuilders.com](http://www.flexcorbuilders.com)

CSLB Lic# 802912  
A, B, C-22, HAZ

DOSH #1246

NAICS:  
238910  
236220  
236115  
237310

Cage Code:  
6V7H7

DUNS:  
01-746-2340

Certification:  
VOSB

DIR# 1000025346

A certified Veteran owned  
small business



### Summary

Flexcor Construction Services is a uniquely flexible and talented company. Our name represents flexibility as well as the core values that drive our vision. These core values include superior customer service, sincere and genuine client relationships that are based on a synergy that can only occur through honest attention to who our customers are and what they truly need. It is our absolute commitment and goal to not just meet, but exceed the expectations of our clients, to deliver excellent value with superior quality.

### Business Summary

Flexcor Construction Services has been in business since 2011. We are a veteran owned small business that specializes in demolition and hazardous material removal to include lead and heavy metals, asbestos and mold abatement. We are capable of doing complete or selective demolition and we hire some of the most professional and specialized teams in the industry.

### Capabilities

- Interior and Exterior Demolition
- Selective Demolition
- Asbestos, Lead and Mold Abatement
- Multi Story Buildings
- Government and Military Complexes

### Customers

- Harper Construction
- IE Pacific, Inc.
- Herman Construction Group
- Stellar Group
- Barnhart-Reese Construction
- Bethel-Webcor JV
- Pacific West Builders
- Soltek Pacific Construction



# CONTRACTORS STATE LICENSE BOARD

Pursuant to Chapter 9 of Division 3 of the Business and Professions Code  
and the Rules and Regulations of the Contractors State License Board,  
the Registrar of Contractors does hereby issue this license to:

## FLEXCOR CONSTRUCTION SERVICES

**License Number 802912**

to engage in the business or act in the capacity of a contractor in the following classifications:

B - GENERAL BUILDING  
A - GENERAL ENGINEERING  
HAZ - HAZARDOUS SUBSTANCES REMOVAL  
C22 - ASBESTOS ABATEMENT

Witness my hand and seal this day,  
November 4, 2021

**Issued January 10, 2002**

Reissued July 13, 2016

A handwritten signature in cursive script, reading 'Susan Granzella', written over a horizontal line.

Susan Granzella, Board Chair

This license is the property of the Registrar of Contractors,  
is not transferable, and shall be returned to the Registrar  
upon demand when suspended, revoked, or invalidated  
for any reason. It becomes void if not renewed.

A handwritten signature in cursive script, reading 'David R. Fogt', written over a horizontal line.

David R. Fogt, Registrar of Contractors



CONTRACTORS  
STATE LICENSE BOARD  
**ACTIVE LICENSE**



License Number **802912**

Entity **CORP**

Business Name **FLEXCOR CONSTRUCTION  
SERVICES**

Classification(s) **B A HAZ C22**

Expiration Date **07/31/2022**

[www.cslb.ca.gov](http://www.cslb.ca.gov)



State of California



Department of Industrial Relations

DIVISION OF OCCUPATIONAL SAFETY AND HEALTH

# *Certificate of Registration for Asbestos-related Work*

Certificate No. 1246

Expiration Date 11/3/2022

**Flexor Construction Services, Inc.**

(Name of Employer)

is duly registered by the Division of Occupational Safety and Health in accordance with the California Administrative Code, Title 8, Article 2.5 for asbestos-related work.

  
Division of Occupational Safety and Health  
Jeff Forrell

Effective Date 11/3/2021

Contractor's License No. 802912

This registration is valid only when the following requirements and conditions are met:

1. The registered employer shall safely perform asbestos-related work in compliance with relevant occupational safety and health regulations.
2. The registered employer shall notify the Division of changes in work locations or conditions as specified by Section 341.9 of Title 8 of the California Administrative Code.
3. The registered employer shall post a sign readable at 20 feet at the location of any asbestos-related work stating:

**Danger - Asbestos  
May Cause Cancer - Causes Damage to Lungs  
Authorized Personnel Only**

4. A copy of the registration shall be posted at the jobsite beside the Cal-OSHA poster.
5. The registered employer shall provide a copy of this registration certificate to the prime contractor and any other employers at the site before the commencement of any asbestos-related work.
6. The registered employer shall conduct a safety conference prior to the commencement of any asbestos-related work as specified by Section 341.11 of Title 8 of the California Administrative Code.
7. The registered employer acknowledges the Division's right to revoke or suspend this registration as provided by Section 341.14 of Title 8 of the California Administrative Code.



**DEPARTMENT OF VETERANS AFFAIRS  
Center for Verification and Evaluation  
Washington DC 20420**

7/16/2019  
In Reply Refer To: **00VE**

Mr. Chad M. Mitten  
Flexcor Construction Services  
DUNS: 017462340  
8250 Vickers Street, Ste E  
San Diego, CA 92111-2117

Dear Mr. Mitten:

On behalf of the U.S. Department of Veterans Affairs (VA), Center for Verification and Evaluation (CVE), I am writing to inform you that Flexcor Construction Services has been verified as a Veteran-Owned Small Business (VOSB) and added to the Vendor Information Pages (VIP) at <https://www.vip.vetbiz.gov/>. Flexcor Construction Services will be eligible to participate in Veterans First Contracting Program opportunities with VA.

**This verification is valid for three (3) years from the date of this letter.**

Please retain a copy of this letter to confirm Flexcor Construction Services's continued program eligibility in accordance with 38 Code of Federal Regulations (CFR) § 74.12. You may reapply 120 days prior to your expiration date by logging in to your VIP profile.

To promote Flexcor Construction Services's verified status, you may use the following link to download the logo for use on marketing materials and business cards: [https://www.vetbiz.gov/cve\\_completed\\_v.jpg](https://www.vetbiz.gov/cve_completed_v.jpg). In addition, please access the following link for information on the next steps and opportunities for verified businesses: <http://www.va.gov/osdbu/verification/whatsNext.asp>.

To ensure that Flexcor Construction Services is correctly listed in the Vendor Information Pages, check Flexcor Construction Services's profile for the verified logo. Please notify us if the logo is not present within 72 hours of receipt of this letter.

While CVE has confirmed that Flexcor Construction Services is presently, as of the issuance of this notice, in compliance with the regulation, Flexcor Construction Services must inform CVE of any changes or other circumstances that would adversely affect its eligibility. Eligibility changes not reported to CVE within 30 days could result in a referral to the Office of Inspector General (OIG), a referral to the Debarment and Suspension Committee, and the initiation of cancellation proceedings—all of which

*"World Class Professionals*

*Enabling Veteran Business Opportunities by Protecting the Veteran Advantage - One Vet at a Time"*

could result in Flexcor Construction Services being removed from the VIP Verification Program.

Please be advised all verified businesses may be required to participate in one or more post-verification audits at CVE's discretion. Additionally, this letter and other information pertaining to Flexcor Construction Services's verification application may be subject to Freedom of Information Act (FOIA) requests. However, FOIA disclosures include exceptions regarding the personal privacy of individuals, and VA policy similarly provides limitations on the release of individual records.

If Flexcor Construction Services receives a negative size determination from the U.S. Small Business Administration (SBA), CVE must act in accordance with 38 CFR § 74.2(e). Also note, if at any time Flexcor Construction Services discovers that it fails to meet the size standards for any NAICS Code(s) listed on its VIP profile, CVE requires such NAICS Code(s) be removed within five (5) business days. If the NAICS Code(s) are not removed within the allotted five (5) business days, CVE may request SBA conduct a formal size determination. In addition, CVE may initiate a referral to OIG, a referral to the Debarment and Suspension Committee, and pursue cancellation proceedings. All of the aforementioned referrals and procedures could result in Flexcor Construction Services being removed from the VIP Verification Program.

Thank you for your service to our country and for continuing to serve America through small business ownership.

Sincerely,

A handwritten signature in black ink, reading "Thomas McGrath". The signature is fluid and cursive, with the first name "Thomas" and last name "McGrath" clearly legible.

Thomas McGrath  
Director  
Center for Verification and Evaluation





November 8, 2021

**RE: Flexcor Construction Services - Contractor Pre-Qualification**

To Whom It May Concern:

I have had the pleasure of handling the surety bonding needs of Flexcor Construction Services since 2016. Flexor Construction Services is a highly regarded and valuable client of our agency. We have established a surety line of \$2.5 million single job limit, \$4 million aggregate work program for this contractor through Contractors Bonding and Insurance Company. Contractors Bonding and Insurance Company is rated "A+" (Superior) by AM Best and is listed in the Federal Treasury Register.

This bonding facility is a working line of credit meant to assist them in the facilitation of bonds that meet their routine needs and is not an indication of the maximum limits the surety would consider. Consideration would be based on the satisfactory completion of normal underwriting requirements, which include, but are not limited to, satisfactory review and approval of the contract terms and conditions, verification of project financing and other pertinent underwriting criteria.

Please be advised that this letter is not a commitment to provide any specific bond(s) and is provided solely as an indication of current surety support. The execution of any bond or bonds is a matter between the contractor and us. We assume no liability to you or any third party in providing this letter. Should you have questions or need additional information please feel free to contact me.

Sincerely,

A handwritten signature in blue ink, appearing to read "Cyndi Beilman". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Cyndi Beilman  
Account Manager and Attorney in fact for  
Contractors Bonding and Insurance Company

5360 Jackson Drive, Suite 208 La Mesa, California 91942 619.501.1899 / 619.270.9833  
[www.sascbonds.com](http://www.sascbonds.com)

# CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

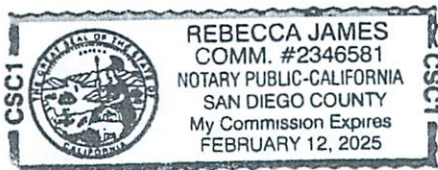
STATE OF CALIFORNIA

County of San Diego

On 11/8/2021 before me, Rebecca James, Notary Public,  
Date Insert Name of Notary exactly as it appears on the official seal

personally appeared Cyndi Beilman

Name(s) of Signer(s)



Place Notary Seal Above

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

Witness my hand and official seal.

Signature Rebecca James  
Signature of Notary Public Rebecca James

## OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of the form to another document.

### Description of Attached Document

Title or Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

### Capacity(ies) Claimed by Signer(s)

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer — Title(s): \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☒ Attorney in Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER

Top of thumb here

Signer is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer — Title(s): \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Attorney in Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER

Top of thumb here

Signer is Representing: \_\_\_\_\_



# United States Environmental Protection Agency

This is to certify that



Flexcor Construction Services

has fulfilled the requirements of the Toxic Substances Control Act (TSCA) Section 402, and has received certification to conduct lead-based paint renovation, repair, and painting activities pursuant to 40 CFR Part 745.89

In the Jurisdiction of:

All EPA Administered States, Tribes, and Territories

This certification is valid from the date of issuance and expires May 07, 2026

NAT-F225059-1

Certification #

April 23, 2021

Issued On



A handwritten signature in black ink that reads "Michelle Price".

Michelle Price, Chief

Lead, Heavy Metals, and Inorganics Branch



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, D.C. 20460

April 23, 2021

Robert Kim  
Flexcor Construction Services  
8250 Vickers Street, Suite E  
San Diego, CA 92111

OFFICE OF CHEMICAL SAFETY  
AND POLLUTION PREVENTION

Dear Robert Kim:

Thank you for applying to the U.S. Environmental Protection Agency (EPA) for certification to conduct Renovation, Repair and Painting Activities in target housing and child-occupied facilities. I am pleased to inform you that, pursuant to 40 CFR Part 745, Subpart E, your renovation, repair and painting firm is certified. Your certificate is enclosed.

This certification **expires on May 07, 2026 and is valid in All EPA Administered States, Tribes, and Territories**. However, if a State in which you are certified obtains program authorization during the term of this certification, the scope of your certification will be diminished to exclude the affected area.

Your EPA firm certification is subject to the following restrictions:

- 1) Individual states and Indian tribes, whether authorized or not, are not required to accept EPA certification and may accept or reject it under its own authority. Please be aware that your EPA certification does not relieve you of any obligations you may have to any State or Indian tribe regarding renovation, repair and painting activities.
- 2) EPA certification is specific and limited as described above. If you wish to obtain certification in other lead-based paint disciplines, you must apply separately.
- 3) In advertising the EPA certification, firms must indicate clearly that the firm is certified only for purposes of Section 402 of TSCA. Failure to accurately state EPA certification conditions could result in EPA suspending or withdrawing certification.
- 4) EPA may conduct audits and/or inspections to ensure continued compliance with regulatory standards, and may revoke or suspend its certification if subsequent alterations or deviations result with the firm no longer meeting the standards found at 40 CFR Part 745, Subpart E.

If you have questions about the renovation, repair and painting rule or need assistance, please contact the Regional Lead Coordinator, Nancy Kain, of the EPA Region 9 staff at 415-947-4280. If you have any questions about your firm certification, please contact the National Lead Information Center at 1-800-424-LEAD and refer to **Application ID number R746717**. Congratulations, and thank you for your interest in being a certified renovation, repair and painting firm.

Sincerely,

A handwritten signature in black ink, appearing to read "Michelle Price", is written over a horizontal line.

Michelle Price, Chief  
Lead, Heavy Metals, and Inorganics Branch

Enclosures



FLEXCON-03

TWANG

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/1/2021

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).

PRODUCER License # 0C36861 San Diego-Alliant Insurance Services, Inc. 701 B St 6th Fl San Diego, CA 92101	CONTACT NAME: Hailey Aguirre	
	PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: Hailey.Aguirre@alliant.com	
INSURED  Flexcor Construction Services 8250 Vickers Street, Ste E San Diego, CA 92111	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : Crum & Forster Specialty Insurance Company	44520
	INSURER B : State Compensation Insurance Fund of California	35076
	INSURER C :	
	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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			EPK-137206	10/1/2021	10/1/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			EFX-118988	10/1/2021	10/1/2022	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N / A	9247850-2021	10/1/2021	10/1/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 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)  
This certificate has been issued as an evidence of insurance coverage only and is not to be reproduced.

## CERTIFICATE HOLDER

## CANCELLATION

Flexcor Construction Services 8520 Vickers Street, Suite E San Diego, CA 92111	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 



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
11/05/2021

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).

<b>PRODUCER</b>  Graham Lopez(996536V) 7808 Clairemont Mesa Blvd Ste 203  San Diego CA 92111-1613	<b>CONTACT NAME:</b>  <b>PHONE</b> (A/C, NO, EXT): 858-560-1909 <b>FAX</b> (A/C, NO): 858-560-1959 <b>E-MAIL ADDRESS:</b> glopez1@farmersagent.com														
<b>INSURED</b>  FLEXCOR CONSTRUCTION SERVICES 8250 VICKERS ST STE E  SAN DIEGO CA 92111	<table><tr><td><b>INSURER(S) AFFORDING COVERAGE</b></td><td><b>NAIC #</b></td></tr><tr><td>INSURER A: Truck Insurance Exchange</td><td>21709</td></tr><tr><td>INSURER B: Farmers Insurance Exchange</td><td>21652</td></tr><tr><td>INSURER C: Mid Century Insurance Company</td><td>21687</td></tr><tr><td>INSURER D:</td><td></td></tr><tr><td>INSURER E:</td><td></td></tr><tr><td>INSURER F:</td><td></td></tr></table>	<b>INSURER(S) AFFORDING COVERAGE</b>	<b>NAIC #</b>	INSURER A: Truck Insurance Exchange	21709	INSURER B: Farmers Insurance Exchange	21652	INSURER C: Mid Century Insurance Company	21687	INSURER D:		INSURER E:		INSURER F:	
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INSURER B: Farmers Insurance Exchange	21652														
INSURER C: Mid Century Insurance Company	21687														
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 NAME 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	ADDTL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea Occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	605433175	01/21/2021	01/21/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A					PER STATUTE <input type="checkbox"/> OTHER \$ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

<b>CERTIFICATE HOLDER</b>	<b>CANCELLATION</b>
	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 Graham Lopez