

PRODUCER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/28/2022

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 Raymond F. Hickey Jr

HICKEY & HICKEY INC			PHONE (A/C, No, Ext): (914) 234-9212 FAX (A/C, No): (914) 234-6035												
PO Box 200			E-MAIL ADDRESS: ryan@hickeyandhickeyinc.com												
Bedford, NY 10506			INS	NAIC#											
				INSURER A: Great A	merican Insura	ince Company									
The National List Inc.				INSURER B :											
				INSURER C :											
1137 Nirvana Road			INSURER D :												
Santa Barbara, CA 93101			INSURER E :												
				INSURER F:											
CO	VERAGES CER	TIFICATE	NUMBER:			REVISION NUMBER:									
IN	HIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY KCLUSIONS AND CONDITIONS OF SUCH	QUIREME PERTAIN,	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF ANY CONTRACT ED BY THE POLICIE BEEN REDUCED BY	OR OTHER S DESCRIBE PAID CLAIMS	DOCUMENT WITH RESPECT TO HEREIN IS SUBJECT TO	ECT TO WHICH THIS TO ALL THE TERMS,								
LTR	TYPE OF INSURANCE	INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S								
	COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE DAMAGE TO RENTED	\$								
	CLAIMS-MADEOCCUR					PREMISES (Ea occurrence)	\$								
						MED EXP (Any one person)	\$								
						PERSONAL & ADV INJURY	\$								
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$								
	POLICY JECT LOC					PRODUCTS - COMP/OP AGG	\$								
	OTHER:					COMBINED SINGLE LIMIT	\$								
	AUTOMOBILE LIABILITY					(Ea accident)	\$								
	ANY AUTO OWNED SCHEDULED					BODILY INJURY (Per person)	\$								
	AUTOS ONLY AUTOS NON-OWNED					BODILY INJURY (Per accident) PROPERTY DAMAGE	\$								
	AUTOS ONLY AUTOS ONLY					(Per accident)	\$								
	I I I I I I I I I I I I I I I I I I I														
	UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$								
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$								
	DED RETENTION \$ WORKERS COMPENSATION					PER OTH-	\$								
	AND EMPLOYERS' LIABILITY Y/N					STATUTE ER									
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A			-	E.L. EACH ACCIDENT	\$								
	(Mandatory in NH) If yes, describe under					E.L. DISEASE - EA EMPLOYEE									
	DÉSCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT Limit of Liability	\$								
Α	Commercial Crime Policy		SAA 5544776 16 00	7/15/2022	7/15/2023	Deductible	\$2.000.000 \$25.000								
^			OAA 3344770 10 00	171072022	771072020		420,000								
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (ACORD	101 Additional Remarks Schedu	lle may be attached if mo	re snace is requi	red)	<u> </u>								
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)															
Evi	dence of Insurance.														
								CERTIFICATE HOLDER CANCELLATION							
OLI	(III IOATE HOEBER	,		CANCELLATION											
For Records Purposes Only				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											
												Mul D. Hling			
C-Vinue D. of clay															
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