**RENUSYS-01** 

**DHALL** 

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/3/2020

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.

If S	ORTANT: If the certificate holder UBROGATION IS WAIVED, subject certificate does not confer rights to	t to	the	terms and conditions of	the po	licy, certain ¡	policies may					
PRODU F <b>GMK</b>	Insurance Agency, Inc.		-	CONTACT NAME: PHONE (A/C, No, Ext): (847) 964-5400 FAX (A/C, No): (847) 964-5401								
2801 Lakeside Drive Bannockburn, IL 60015						E-MAIL ADDRESS:						
						INSURER(S) AFFORDING COVERAGE					NAIC #	
				INSURER A: Ohio Casualty Insurance Company						24074		
INSURED					INSURER B : Ohio Security Insurance Company					24082		
Renue Systems of Chicago						INSURER C: AmTrust Insurance Company of Kansas						
1102 N. Main St.					INSURER D :							
Lombard, IL 60148						INSURER E:						
				INSURER F:								
COVERAGES CERTIFICATE NUMBER:					REVISION NUMBER:							
IND	S IS TO CERTIFY THAT THE POLICIE CATED. NOTWITHSTANDING ANY R	EQUI	REME	ENT, TERM OR CONDITION	N OF A	NY CONTRA	CT OR OTHER	DOCUMENT WITH	RESPEC	CT TO	WHICH THIS	
EXC	TIFICATE MAY BE ISSUED OR MAY LUSIONS AND CONDITIONS OF SUCH I	POLI	CIES.	LIMITS SHOWN MAY HAVE		REDUCED BY	PAID CLAIMS.	ED HEREIN IS SUB.	JECT TO	) ALL	THE TERMS,	
NSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS				
A []	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE		\$	1,000,000	
	CLAIMS-MADE X OCCUR			BKO55377976		3/1/2020	3/1/2021	DAMAGE TO RENTED PREMISES (Ea occurre	nce)	\$	100,000	
								MED EXP (Any one pers	son)	\$	15,000	
								PERSONAL & ADV INJU	JRY :	\$	1,000,000	
	EN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGAT	E :	\$	2,000,000	

Α	X COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE	\$ 1,000,000
	CLAIMS-MADE X OCCUR		BKO55377976	3/1/2020	3/1/2021	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
						MED EXP (Any one person)	\$ 15,000
						PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 2,000,000
	X POLICY PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$ 2,000,000
	OTHER:						\$
В	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	X ANY AUTO		BAS55377976	3/1/2020	3/1/2021	BODILY INJURY (Per person)	\$
	OWNED AUTOS ONLY SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
							\$
A	X UMBRELLA LIAB X OCCUR					EACH OCCURRENCE	\$ 10,000,000
	EXCESS LIAB CLAIMS-MADE		USO55377976	3/1/2020	3/1/2021	AGGREGATE	\$ 10,000,000
	DED X RETENTION \$ 10,000						\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					X PER OTH- STATUTE ER	
	AND EIIII EO EIAD EIAD EIAD EIAD EIAD EIAD EIAD EIAD		KWC1200710	3/1/2020	3/1/2021	E.L. EACH ACCIDENT	\$ 1,000,000
	(Mandatory in NH)	,				E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
A	Vol Property Damage		BKO55377976	3/1/2020	3/1/2021	Limit	25,000
Α	Limited Off Prem CCC		BKO55377976	3/1/2020	3/1/2021		

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

CERTIFICATE HOLDER	CANCELLATION				
EVIDENCE 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  Rene April				