

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/27/2022

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 confor rights to the certificate holder in liquid found and remember (s)

this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).											
PRODUCER						CONTACT NAME:					
HNI Risk Services					PHONE (A/C, No, Ext): FAX (A/C, No): (847) 705-1075						
1621 Colonial Parkway						E-MAIL tgcerts@hni.com					
							SURER(S) AFFOR	RDING COVERAGE		NAIC#	
Inverness IL 60067						INSURER A: Everest Denali Insurance Company					
INSURED					INSURER B: Continental Casualty Company					20443	
The Custom Companies, Inc.					INSURER C:						
135 North Railroad Avenue					INSURE	RD:					
					INSURE	RE:					
Northlake				IL 60164	INSURER F:						
CO	VERAGES CER	TIFIC	ATE	NUMBER: 17) 22-23 TCC	C V1			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	NSR TR TYPE OF INSURANCE		SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$ 1,00	0,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	_{\$} 250,	000	
								MED EXP (Any one person)	_{\$} 10,0	00	
Α		N	N	RM8GL00071-221		11/01/2022	11/01/2023	PERSONAL & ADV INJURY	\$ 1,00	0,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,00	0,000	
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 1,00	0,000	
	OTHER:								\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$ 1,00	0,000	
	ANY AUTO						11/01/2023	BODILY INJURY (Per person)	ODILY INJURY (Per person) \$		
Α	OWNED SCHEDULED AUTOS	N	N	RM8CA00203-221	11/	11/01/2022		BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	★ Contingent								\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE	N	N					AGGREGATE	\$		
	DED RETENTION \$							Lasa Lasa	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							PER OTH- STATUTE ER			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under		N/A	N					E.L. EACH ACCIDENT	\$		
								E.L. DISEASE - EA EMPLOYEE \$			
	SCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
В	CONTINGENT CARGO	N	N	5093651096		07/01/2022	07/01/2023	LIMIT PER VEHICLE \$10		0,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)											
This certificate supercedes any previously issued certificates.											
CERTIFICATE HOLDER						CANCELLATION					
*******Proof of Coverage********						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											
l							_	N 71.81			

© 1988-2015 ACORD CORPORATION. All rights reserved.