CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 4/9/2015

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 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

Cordell & Company Insurance Agency
P O Box 12129

Fort Worth TX 76110-8129

CONTACT NAME:
PHONE (A/C, No, Ext): (817)924-4236 FAX (A/C, No): (817)921-0170
E-MAIL ADDRESS: cordell@cordellinsurance.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Security Natl Ins Co./PH	
INSURER B : Technology Insurance Company	
INSURER C : Natl Union Fire Ins/Paul Hanso	
INSURER D : Wesco Insurance Company/Paul Hanson	
INSURER E : New Hampshire Ins. Co./Paul Ha	
INSURER F :	

INSURED

Jones Moving & Storage Company, Inc.
P.O. Box 631

Harlingen TX 78551

COVERAGES CERTIFICATE NUMBER: 15/16 Unigroup cert 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	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE / X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY / PRO-JECT / LOC OTHER:			SPP110992001	4/10/2015	4/10/2016	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							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 X ANY AUTO ALL OWNED AUTOS / SCHEDULED AUTOS X HIRED AUTOS / X NON-OWNED AUTOS			TPP106000101	4/10/2015	4/10/2016	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
							Uninsured motorist combined	$ 85,000
C	X UMBRELLA LIAB / OCCUR EXCESS LIAB / CLAIMS-MADE DED X RETENTION $ 25,000			29-UD-000284086-8	4/10/2015	4/10/2016	EACH OCCURRENCE	$ 2,000,000
							AGGREGATE	$ 2,000,000
								$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N: Y (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		WWC31280269	2/24/2015	2/24/2016	X PER STATUTE / 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
E	Cargo Liability			01-LX-008999155-9	4/10/2015	4/10/2016	$250,000/ $500,000	Per Trk/ Occ
	Warehouse Legal Liability						Goods in Storage	$2,750,000

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

Unigroup, Inc. & subsidiaries is added as additional insured with respect to general liability per CG2026 04 13, auto liability per CA2048 02 99, warehouse legal liability and cargo liability per the Moving and Storage Coverage Endorsement Form, for contract with insured; subject to all policy terms and provisions and legal liability established in the agent agreement. 30-day notice of cancellation provided for GL & Auto per attached form. 30-day notice of cancellation provided for IM per attached form 108538. Coverage includes all states coverage and casual labor is included for all states except for the monopolistic states: OH, ND, WA and WY. 30-day notice of cancellation provided per attached form WC

CERTIFICATE HOLDER

SAMPLE CERTIFICATE

CANCELLATION

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

Milton Cordell/DGB

© 1988-2014 ACORD CORPORATION. All rights reserved.