

CERTIFICATE OF LIABILITY INSURANCE

MHARING DATE (MM/DD/YYYY)

AUTOCON-07

									10	/17/2023	
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 If SUBROGATION IS WAIVED, subject this certificate does not confer rights to	t to	the	terms and conditions of	the po	licy, certain	policies may					
PRODUCER Hub International Florida 2811 NW 41st Street Gainesville, FL 32606					CONTACT NAME: PHONE (A/C, No, Ext): (352) 377-2002 FAX (A/C, No):(352) 376-8393						
					E-MAIL ADDRESS:						
	INSURER(S) AFFORDING COVERAGE					NAIC #					
	INSURER A : Main Street America Protection Insurance Company					13026 18988					
INSURED AUTOMATED CONTROLS OF NEWBERRY LLC 134 SW 140th Terr					INSURER B : Auto-Owners Insurance Company INSURER C : Old Dominion Insurance Company					40231	
					INSURER D : Zenith Insurance Company					13269	
Newberry, FL 32669-3025					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 TYPE OF INSURANCE		SUBR WVD			POLICY EFF	POLICY EXP (MM/DD/YYYY)		LIMIT	s		
A COMMERCIAL GENERAL LIABILITY CLAIMS-MADE OCCUR	x		MPG0254A		10/17/2023	10/17/2024	EACH OCCURRE DAMAGE TO REI PREMISES (Ea o		\$	1,000,000	
	~						MED EXP (Any or		\$	10,000	
							PERSONAL & AD	V INJURY	\$	1,000,000	
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGR	EGATE	\$	2,000,000	
							PRODUCTS - CO	MP/OP AGG	\$	2,000,000	
B AUTOMOBILE LIABILITY							COMBINED SING		\$	1,000,000	
	х	x	9426313800		4/5/2023	4/5/2024	(Ea accident) BODILY INJURY	(Per person)	\$		
OWNED AUTOS ONLY SCHEDULED	~						BODILY INJURY	(Per accident)	\$		
HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAM (Per accident)	AGE	\$		
									\$	1,000,000	
C X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE			CUG0254A		10/17/2023	10/17/2024			\$	1,000,000	
DED X RETENTION \$ 10,000							AGGREGATE Commercial	Umbr	\$ ¢	1,000,000	
D WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER	Ψ		
	N/A		Z136513004		3/1/2023	3/1/2024	E.L. EACH ACCIE		\$	1,000,000	
OFFICER/MEMBER EXCLUDED? N (Mandatory in NH) If yes, describe under							E.L. DISEASE - E	A EMPLOYEE	\$	1,000,000	
DESCRIPTION OF OPERATIONS below							E.L. DISEASE - P	OLICY LIMIT	\$	1,000,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICI The Alachua County Board of County Comr Liability and General Liability. Liability arisi Operations of the Contractor/ Vendor. The C employees and volunteers. Any insurance Contractor/Vendors insurance and shall be	ng ou Contra or se	ut of a actor If-ins	activities performed by or or s insurance coverage shal urance maintained by the o	on beha II be co	alf of the Con nsidered prin	tractor/Vendo	or; to include e as respects	Products a the County	nd /or /, its of	Completed	
				CANC							
CERTIFICATE HOLDER	CAN	ELLATION									
The Alachua County Board of Commissioners 12 SE 1st Street Gainesville, FL 32601					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						

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