ACORD	

Exhibit B - Sample Certificate of Insurance CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

							DD/YYYY						
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).													
doubh Digh Non-generat IIG								PHONE 903 733 5394					
								(À/C, No, Ext): 003.733.5204 X317 (À/C, No): 803.733.5287 E-MAIL ADDRESS: jmyers@southrisk.com					
Columbia, SC 29204													
							INSURER(S) AFFORDING COVERAGE NAIC #						
INSURED								INSURER A: CARRIERS MUST HAVE MINIMUM A- RATING BY AM BEST					
Vendor/Subcontractor Name								INSURER B :					
Vendor/Subcontractor Name Vendor/Subcontractor Address								RC:					
ver.		L/ Bubconcra	CCOI Address			-	INSURE						
						-	INSURER E :						
		AGES	055		× TF		INSURE	RF:					
						NUMBER:				REVISION NUMBER:			
IN Ce	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 IN	ISURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
	х	COMMERCIAL GEI	NERAL LIABILITY							EACH OCCURRENCE	\$	1,000,000	
А		CLAIMS-MADE	E X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000	
				x	х	POLICY NUMBER		MM/DD/YYYY	MM/DD/YYYY	MED EXP (Any one person)	\$	5,000	
										PERSONAL & ADV INJURY	\$	1,000,000	
	GEN	N'L AGGREGATE LIN	IT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000	
		POLICY X PRO								PRODUCTS - COMP/OP AGG	\$	2,000,000	
		OTHER:									\$		
	AUTOMOBILE LIABILITY							MM/DD/YYYY	MM/DD/YYYY	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
-	X ANY AUTO ALL OWNED SCHEDULED AUTOS AUTOS						М			BODILY INJURY (Per person)	\$		
в				x	x	POLICY NUMBER				BODILY INJURY (Per accident)	\$		
	х		X NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)	\$		
										(\$		
	х	UMBRELLA LIAB	X OCCUR							EACH OCCURRENCE	\$	1,000,000	
C		EXCESS LIAB	CLAIMS-MADE							AGGREGATE	\$	1,000,000	
		DED X RETER	NTION \$ 10,000	x	х	POLICY NUMBER		MM/DD/YYYY	MM/DD/YYYY		\$		
		RKERS COMPENSAT	ION							X PER OTH- STATUTE ER			
	AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			1						E.L. EACH ACCIDENT	\$	500,000	
D				N/A	x	POLICY NUMBER		MM/DD/YYYY	MM/DD/YYYY	E.L. DISEASE - EA EMPLOYEE	\$	500,000	
	If yes	s, describe under CRIPTION OF OPER	ATIONS below							E.L. DISEASE - POLICY LIMIT		500,000	
	020										Ŧ		
DESC	RIPT	ION OF OPERATION	IS / LOCATIONS / VEHIC	LES (A	CORE	0 101, Additional Remarks Schedu	le, may t	e attached if mo	re space is requi	red)			
Project:													
Certificate holder is an additional insured for general liability for ongoing and products/completed operations, automobile liability, and umbrella liability. Waiver of subrogation applies in favor of													
-		-		-	-		-		-				
			-			ility, automobile				-			
lia hol		-	overages are	pri	mar	y and non-contribu	tory	to any i	nsurance	maintained by ce	rtiti	cate	
101	.uei												

CERTIFICATE HOLDER	CANCELLATION					
J Musselman Construction, Inc. PO Box 31436 Charleston, SC 29417	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					

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