STALPGRAVE

ACORD.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/23/2022

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 confer any rights to the certificate holder in lieu of such endorsement(s).

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PRODUCER	Lannon		8	CANAL AURING AU							
INSPRO, a Marsh & McLennan Agency LLC, Company 4000 Pine Lake Road						o, Ext): 402 37	2 2139		402 372 2237		
이어가 되는 아이지만 하게 되었다는 그는 얼마나 되었다.	McLennan McLenn										
	RO, a Marsh & McLennan cy LLC, Company Pine Lake Road In, NE 68506 Stalp Gravel Inc. Stalp Trucking Inc 1598 River Road West Point, NE 68788 RAGES CERTIFICATE NUMBER: IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW BEATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION IFFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORMUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY FIVE OF INSURANCE COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR ENTL AGGREGATE LIMIT APPLIES PER: POLICY PRODUCY			` O							
						INSURER A : Acuity Insurance 14184					
INSURED Stalp Gravel	Inc. Stalp Tru	ckin	a Inc								
					INSURERC: Agenda Item # 2/a			2/2			
West Point, NE 68788					INSURE	RD:	Date	12/12/	122		
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00//504050	OFD	TITIO	A T.E.	NUMBED.	INSURE	RF:		DEVICION NUMBER.			
A CONTRACTOR OF THE CONTRACTOR											
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 INSR	SUBR WVD POLICY NUMBER		POLICY EFF (MM/DD/YYYY)		POLICY EXP (MM/DD/YYYY)	LIMIT	S		
A COMMERCIAL GENER	AL LIABILITY			F27571		12/01/2022	12/01/2023		\$1,000,000		
CLAIMS-MADE	X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$250,000		
]	MED EXP (Any one person)	\$10,000		
								PERSONAL & ADV INJURY	\$1,000,000		
	APPLIES PER:						8	GENERAL AGGREGATE	TOTAL RESIDENCE DESCRIPTION		
POLICY JECT	LOC					549		PRODUCTS - COMP/OP AGG			
							4010410000	COMBINED SINGLE LIMIT			
				F2/5/1		12/01/2022	12/01/2023	Alan are a comment of the comment of	* * * * * * * * * * * * * * * * * * * *		
	SCHEDULED										
AUTOS ONLY HIRED V	AUTOS							PROPERTY DAMAGE	2		
X AUTOS ONLY X	AUTOS ONLY				,			(Per accident)	*		
A X UMBRELLA LIAB	V aggun			E27574		12/01/2022	12/01/2022	EACH OCCUPRENCE	Toronto Carlos C		
23	CLAIMS-MADE			F2/5/1		12/01/2022	12/01/2023	The state of the s	Transaction interests to transact		
								AGGREGATE			
△ WORKERS COMPENSATIO	S COMPENSATION			F27571		12/01/2022	12/01/2023	X PER OTH-	Ψ		
AND EMPLOYERS LIABILITY VIN		N/A		12/0/1		IZIO IIZOZZ	12/01/2020	THE COLUMN TO SERVICE AND A STREET AND A STR	\$1,000,000		
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?											
If yes, describe under DESCRIPTION OF OPERATI	ONS below										
DECOMMINATION OF BRIDE	0110 201011								.,		
								f 1 CD			
DESCRIPTION OF OPERATIONS I	LOCATIONS / VEHIC	LES (F	ACORD) 101, Additional Remarks Schedu	ule, may l	be attached if mo	ore space Is requi	EV 28 EN 7:	_		
CERTIFICATE HOLDER				CANCELLATION							
Dodge County Highway Department Courthouse - 435 N. Park Fremont, NE 68025						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 Rul B. Winey					
						ex. w.					

MWADE

ACORD'

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/18/2022

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.

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

thi	s certificate does not confe	er rights to	the	cne certif	icate holder in lieu of su	ch endo	rsement(s).		require an endorseine	, A 30	atoment on
	UCER	/		N			T Housemo		LEAV		
lagu	ilre Agency Oakcrest Avenue, Suite 30	n 4	,			PHONE (A/C, No.	Ext): (651) 6	38-9100		(651) 6	38-9762
lose	ville, MN 55113		/			E-MAIL ADDRES	_{s:} msundee	n@maguir	eagency.com		energy services — — — — — — — — — — — — — — — — — — —
							INS	URER(S) AFFOR	DING COVERAGE		NAIC'#
\O_{\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						INSURER A: Nova Casualty Company					42552
INSURED Ensor Movers, Inc.						INSURER B:					
						INSURER C: Agenda Item #					
	63149 734 Rd					INSURE	RD:	Det			
	Brock, NE 68320	- 89				INSURE	RE:	Dat	.C	and an expense	
						INSURE	RF:				
cov	/ERAGES	CERT	rific	ATE	NUMBER:	172			REVISION NUMBER:		
INI	IIS IS TO CERTIFY THAT TI DICATED. NOTWITHSTANDI ERTIFICATE MAY BE ISSUED CCLUSIONS AND CONDITIONS	NG ANY RE	QUII PFR1	REME AIN.	NT, TERM OR CONDITION THE INSURANCE AFFOR	V OF A	NY CONTRAC THE POLICI EDUCED BY F	CT OR OTHER ES DESCRIBI PAID CLAIMS.	R DOCUMENT WITH RESE	ECI 10	WHICH THIS
NSR LTR	TYPE OF INSURANCE		ADDL INSD	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIM	ITS	
A	X COMMERCIAL GENERAL LIA								EACH OCCURRENCE	\$	1,000,000
		CCUR			MSMML10000077	1	4/21/2022	4/21/2023	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
									MED EXP (Any one person)	s	5,000
1						1			PERSONAL & ADV INJURY	s	1,000,000
	OFAUL ACCRECATE LIMIT ASSURE	e DED-							GENERAL AGGREGATE	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIE POLICY X PRO-	LOC							PRODUCTS - COMP/OP AGO		2,000,000
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	100							TROBUSTO COMITTOT TICK	\$	
Α	OTHER: AUTOMOBILE LIABILITY								COMBINED SINGLE LIMIT (Ea accident)	s	1,000,000
	X ANY AUTO				MSMML10000077		4/21/2022	4/21/2023	BODILY INJURY (Per person)		
	OWNED AUTOS ONLY SCHEDULED AUTOS				III OMMIZIO O O O T		7/21/2022	4/21/2020	BODILY INJURY (Per accider	00 00	
		OWNED OS ONLY							PROPERTY DAMAGE (Per accident)	s	
	HIRED AUTOS ONLY AUTO	OS ONLY							(Fer accident)	s	
	UMPRELLA LIAR	OCCUR							EACH OCCURRENCE	s	
		CLAIMS-MADE							AGGREGATE	5	
		JE IIIIO III IDE							ACCILLONIC	s	
			-						PER OTH-		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N							E,L, EACH ACCIDENT	s	
	ANY PROPRIETOR/PARTNER/EXEC OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	JULIVE	N/A						E.L. DISEASE - EA EMPLOY		
	If ves, describe under		1						E.L. DISEASE - POLICY LIM	250	
Λ	DÉSCRIPTION OF OPERATIONS b Cargo	elow	-	-	MSMML10000077		4/21/2022	4/21/2023	ACV (\$5,000 Ded)	1 0	125,000
A	Cargo	£						0.000.000.000.000.000.000.000			
									(3	[23]	
						NEC 000000		100 000 000 000 000 000 000 000 000 000		1	
DES	CRIPTION OF OPERATIONS / LOCA	TIONS / VEHIC	LES (ACOR	D 101, Additional Remarks Sched	ule, may b	e attached if mo	re space is requi	red)	1	
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										1 3	II.
	1.00										
CE	RTIFICATE HOLDER					CAN	CELLATION		53.		
Dodge County Highway Dept 435 North Park Fremont, NE 68025						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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	Y .					1 1/4		Contraction of the last of the	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NAMED IN COLUMN T		

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