



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/03/2011PRODUCER (727) 347-3158
Bozeman Insurance Inc.
6400 Central Avenue

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

St Petersburg FL 33707-1329

INSURERS AFFORDING COVERAGE

NAIC #

INSURED ABC 1-2 TREE INC
2901 32ND AVE N

INSURER A: TRAVELERS CASUALTY & SURETY

INSURER B:

INSURER C:

INSURER D:

INSURER E:

PINELLAS

ST PETE FL 33713-

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC		/ /	/ /	EACH OCCURRENCE	\$
			/ /	/ /	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
			/ /	/ /	MED EXP (Any one person)	\$
			/ /	/ /	PERSONAL & ADV INJURY	\$
			/ /	/ /	GENERAL AGGREGATE	\$
			/ /	/ /	PRODUCTS - COMPOP AGG	\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		/ /	/ /	COMBINED SINGLE LIMIT (Ea accident)	\$
			/ /	/ /	BODILY INJURY (Per person)	\$
			/ /	/ /	BODILY INJURY (Per accident)	\$
			/ /	/ /	PROPERTY DAMAGE (Per accident)	\$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO		/ /	/ /	AUTO ONLY - EA ACCIDENT	\$
			/ /	/ /	OTHER THAN AUTO ONLY: EA ACC	\$
			/ /	/ /	AGG	\$
	EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$		/ /	/ /	EACH OCCURRENCE	\$
			/ /	/ /	AGGREGATE	\$
			/ /	/ /		\$
			/ /	/ /		\$
			/ /	/ /		\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below	XACRUB3733T21-4-11	06/01/2011	06/01/2012	WC STATUTORY LIMITS	OTH-ER
	Y/N <input checked="" type="checkbox"/> N		/ /	/ /	E.L. EACH ACCIDENT	\$ 100,000
			/ /	/ /	E.L. DISEASE - EA EMPLOYEE	\$ 100,000
			/ /	/ /	E.L. DISEASE - POLICY LIMIT	\$ 500,000
	OTHER		/ /	/ /		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER ESPIRITU SANTO CATHOLIC SCHOOL ESPIRITU SANTO CATHOLIC CHURCH THE DIOCESE OF ST PETERSBURG AND MOST REVEREND ROBERT N LYNCH, BISHOP

CERTIFICATE HOLDER

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

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