



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/12/2019

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).

<b>PRODUCER</b> Kapnick Insurance Group 333 Industrial Drive Adrian MI 49221-7801		<b>CONTACT NAME:</b> Annette Meyer	
		<b>PHONE (A/C, No, Ext):</b> 517-263-4600	<b>FAX (A/C, No):</b>
		<b>E-MAIL ADDRESS:</b> misty.riley@kapnick.com	
		<b>PRODUCER CUSTOMER ID #:</b> COMMF-1	
<b>INSURED</b> Commercial Freight Services, Inc. FDL Capital Lease, LLC. American Commercial Trust 30255 Beverly Rd. Romulus MI 48174		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> Great West Casualty Company	<b>NAIC #</b> 11371
		<b>INSURER B:</b> Central Mutual Insurance Co.	20230
		<b>INSURER C:</b>	
		<b>INSURER D:</b>	
		<b>INSURER E:</b>	
		<b>INSURER F:</b>	

**COVERAGES**                      **CERTIFICATE NUMBER:** 1224236807                      **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	ADD'L SUBR INSR	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	GENERAL LIABILITY			CLP 8652511	1/1/2020	1/1/2021	EACH OCCURRENCE DAMAGE TO RENTED PROPERTY (Ea occurrence) \$ 1,000,000 RENTALS (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COM/OP AGG \$ 3,000,000 \$
X	COMMERCIAL GENERAL LIABILITY						
	CLAIMS-MADE		X				
	OCUR						
	GEN'L AGGREGATE LIMIT APPLIES PER						
X	POLICY		PRO-JECT				
	LOC						
A	AUTOMOBILE LIABILITY			GWP91209J	1/1/2020	1/1/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
X	ANY AUTO						
	ALL OWNED AUTOS						
	SCHEDULED AUTOS						
X	HIRED AUTOS						
X	NON-OWNED AUTOS						
	UMBRELLA LIAB		OCUR				EACH OCCURRENCE \$
	EXCESS LIAB		CLAIMS-MADE				AGGREGATE \$
	DEDUCTIBLE						\$
	RETENTION \$						\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC25308J	1/1/2020	1/1/2021	X WC STATUTORY LIMITS OTH-ER E L EACH ACCIDENT \$ 500,000 E L DISEASE - EA EMPLOYEE \$ 500,000 E L DISEASE - POLICY LIMIT \$ 500,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		Y/N				
	If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				
A	Motor Truck Cargo			GWP91209J	1/1/2020	1/1/2021	Limit 100,000 50,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)**  
Motor Truck Cargo Deduct: \$2,500

<b>CERTIFICATE HOLDER</b>  SAMPLE CERT HOLDER WILL BE LISTED UPON REQUEST ...	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b> <i>James S. Kapnick</i>

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