



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/03/2020

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

PRODUCER The Roehr Agency 4642 Ridge Ave. Cincinnati, OH 45209 Alvin F. Roehr, Jr.		513-985-0353	CONTACT NAME: Lisa Gonzales PHONE (A/C, No, Ext): 513-985-0353 FAX (A/C, No): 513-985-0359 E-MAIL ADDRESS: lgonzales@roehrrins.com
INSURED Taylor Distributing Company Taylor Warehouse Corp Taylor Logistics, Inc. Taylor Brothers Management, Inc Rex Taylor 9756 International Blvd Cincinnati, OH 45246		INSURER(S) AFFORDING COVERAGE INSURER A: Cincinnati Insurance Company INSURER B: Travelers Property & Casualty INSURER C: Federal Insurance Company INSURER D: INSURER E: INSURER F:	NAIC # 10677 25674 20281

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 LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			EPP0219722	12/01/2019	12/01/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Emp Ben. \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> \$5000 ded <input type="checkbox"/> Comp & Col			EBA0219722	12/01/2019	12/01/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Hired Phys Dama \$ 100,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			EPP0219722	12/01/2019	12/01/2020	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input checked="" type="checkbox"/> Y/N <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	EPP0219722 EMPLOYERS LIABILITY	12/01/2019	12/01/2020	<input type="checkbox"/> PER STATUTE <input checked="" type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
B	Motor Truck Cargo			QT6602H541476	05/01/2019	05/01/2020	250,000
B	Warehouse Legal			QT6602H541476 LIABILITY	05/01/2019	05/01/2020	5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER <div style="border: 1px solid black; padding: 5px; text-align: center;"> SPECIMEN ONLY </div>	CANCELLATION 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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Co. Code:C- Theft by Employee-
limit \$500,000
Insurer- Chubb Policy 6800-7532
05/01/2019 till 05/01/2020

Co. Code A- Trailer Interchange Coverage Policy #EPP0219722
Insurer- Cincinnati Insurance Company - Limit 75,000
12/01/2019 till 12/01/2020

CONTINGENT CARGO COVERAGE*:

Insurer B-Travelers Property & Casualty Policy #QT6602H541476
\$250,000 limit Any One Vehicle; Effective 5-1-2019 till 05/01/2020
*Includes Reefer coverage with \$5,000 deductible on Motor Truck Cargo and
Contingent Cargo Coverage.

TRANSPORTATION POLLUTION LIABILITY:

Crum & Forster -Policy # CPL109871
Effective 2-19-2019 to 02/19/2020
\$2,000,000 Each Occurrence/\$2,000,000 Aggregate

Errors & Omissions Liability:

Houston Casalty Company
Policy # H718-112158
08/30/2019 till 08/30/2020
Limit \$1,000,000 each claim
\$1,000,000 for the total of all claims
Retention \$3,000 for each claim

Leased and Rented Contractors Equipment

Policy Limit \$100,000
Ded \$500

Truck Broker Legal Liability

Hudson Excess Insurance Company
01/15/2020 till 01/15/2021
Any One Occurrence Limit : \$1,000,000