

# CERTIFICATE OF INSURANCE

Date (MM/DD/YY)

1/1/2019

**PRODUCER**

**Cherokee Insurance Company**  
**34200 Mound Road**  
**Sterling Heights, MI 48310**  
**800-201-0450**

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.

**COMPANIES AFFORDING COVERAGE**

COMPANY

**A Cherokee Insurance Company**

**INSURED**

**Central Transport, LLC**  
**dba Central Transport**  
**12225 Stephens Road**  
**Warren, Michigan 48089**

COMPANY

**B**

COMPANY

**C**

COMPANY

**D**

## COVERAGES

THIS IS TO CERTIFY THAT THE INSURANCE POLICIES LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE INDICATED POLICY PERIOD, 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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS			
A	<b>GENERAL LIABILITY</b>	<b>GL190010</b>	<b>1/1/2019</b>	<b>1/1/2020</b>	GENERAL AGGREGATE	<b>\$ 1,000,000</b>		
	<input checked="" type="checkbox"/> COMMERCIAL G/L				PRODUCTS-COMP/OP AGG	<b>Not Included</b>		
	<input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY	<b>Not Included</b>		
	<input type="checkbox"/> OWNERS & CONTRACTOR'S PROT				EACH OCCURRENCE	<b>\$ 1,000,000</b>		
	<input type="checkbox"/>				FIRE DAMAGE (Any one fire)	<b>\$ 50,000</b>		
					MED EXP (Any one person)	<b>\$ 5,000</b>		
A	<b>AUTOMOBILE LIABILITY</b>	<b>CA190010</b>	<b>1/1/2019</b>	<b>1/1/2020</b>	COMBINED SINGLE LIMIT	<b>\$ 1,000,000</b>		
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per Person)			
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)			
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE			
	<input type="checkbox"/> HIRED AUTOS				AUTO ONLY-EA ACCIDENT			
	<input type="checkbox"/> NON-OWNED AUTOS				OTHER THAN AUTO ONLY:			
A	<input checked="" type="checkbox"/> <b>Trailer Interchange</b>				EACH ACCIDENT			
	<b>\$40,000 per unit</b>				AGGREGATE			
	<b>GARAGE LIABILITY</b>				EACH OCCURRENCE			
	<input type="checkbox"/> ANY AUTO				AGGREGATE			
	<b>EXCESS LIABILITY</b>							
	<input type="checkbox"/> UMBRELLA FORM							
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM							
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>	<b>WC190010</b>	<b>1/1/2019</b>	<b>1/1/2020</b>	WC STATU- TORY LIMITS	<input checked="" type="checkbox"/>	OTH- ER	
	THE PROPRIETOR/ PARTNERS/EXECUTIVE				<input type="checkbox"/> INCL		EL EACH ACCIDENT	<b>\$ 1,000,000</b>
	OFFICERS ARE:				<input checked="" type="checkbox"/> EXCL		EL DISEASE-POLICY LIMIT	<b>\$ 1,000,000</b>
							EL DISEASE-EA EMPLOYEE	<b>\$ 1,000,000</b>
A	<b>OTHER</b>	<b>MC190010</b>	<b>1/1/2019</b>	<b>1/1/2020</b>				
	<b>Mtr Truck Cargo</b>							<b>\$ 100,000</b>

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES**

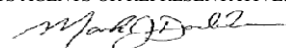
"Cargo coverage for used machinery, equipment, and other used materials is limited to a maximum of ten cents per pound."

**CERTIFICATE HOLDER**

**FOR INFORMATIONAL PURPOSES ONLY**

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVE.



AUTHORIZED REPRESENTATIVE