

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/20/2025

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 liqu of such endorsement(s)

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PRODUCER						CONTACT Tiffany Black					
Cross Insurance						NAME:					
						(A/C, No, Ext): (A/C, No):					
491 Main Street						ADDRESS: tiffany.black@crossagency.com					
P.O. Box 1388						INSURER(S) AFFORDING COVERAGE					
Bangor ME 04401						INSURER A: Concord General Mutual Ins Co					
INSURED						INSURER B:					
American Builders LLC					INSURER C:						
	22 Scott Rd		INSURER D:								
					INSURER E :						
Pittston				ME 04345	INSURER F:						
COVERAGES CERTIFICATE NUMBER: CL2510230690 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			DUSUBR DUWVD POLICY NUMBER			POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY		LIMITS			
	COMMERCIAL GENERAL LIABILITY					Ì	,	EACH OCCURRENCE	\$ 1,00	0,000	
	CLAIMS-MADE X OCCUR						•	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,0	00	
								MED EXP (Any one person)	\$ 5,00	0	
Α				20038388		10/07/2025	10/07/2026	PERSONAL & ADV INJURY	\$		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	_	0,000	
	PRO- POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG		0,000	
	OTHER:							TROBOOTO - COMITTOT ACC	\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
Α	ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY			20038388		10/07/2025	10/07/2026	BODILY INJURY (Per person)	\$		
								BODILY INJURY (Per accident)	\$		
								PROPERTY DAMAGE	\$		
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$		
	UMBRELLA LIAB OCCUR							EACH OCCUPPENCE	\$		
	EVOTOS LIAD							EACH OCCURRENCE			
	CLAIIVIS-IVIADE	1						AGGREGATE	\$		
	DED RETENTION \$ WORKERS COMPENSATION							PER OTH- STATUTE ER	\$		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE							· · · ·	•		
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A						E.L. EACH ACCIDENT	\$		
If ves, describe under								E.L. DISEASE - EA EMPLOYEE	\$		
	DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
Leased/Rented Equipment				20038388		10/07/2025	10/07/2026	Limit \$100,0		0,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)											
CEF	RTIFICATE HOLDER		ELLATION								
For Evidence Only American Builders LLC						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					
22 Scott Road											
	Pittston	ME 04345	Lauren Burkard								