Midland Contractors LLC 7441 Oil Well Rd Clermont, FL 34714



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/20/2024

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 this certificate does not confer rights to				ıch end	dorsement(s		require an endorse	ment. A	statement on	
PRODUCER				CONTAC NAME:	СТ					
BIBERK					o, Ext): 844-47	72-0967	FAX (A/C	(, _{No):} 203	3-654-3613	
P.O. Box 113247				E-MAIL ADDRES			biBERK.com	,,,,,,,		
Stamford, CT 06911				ADDILL	 		RDING COVERAGE		NAIC#	
				INSURE		. ,	nsurance Company		20052	
INSURED Midland Contractors LLC				INSURER B:						
Midiand Contractors LLC					INSURER C:					
7441 Oil Well Rd Clermont, FL 34714					INSURER D:					
					INSURER E:					
					INSURER F:					
			E NUMBER:	/F DEE	N ICCUED TO		REVISION NUMBE		OLIOV PEDIOD	
THIS IS TO CERTIFY THAT THE POLICIES INDICATED. NOTWITHSTANDING ANY RI CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	EQUIF PERT POLI	REME TAIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF ANY	CONTRACT THE POLICIES REDUCED BY 1	OR OTHER I S DESCRIBEI PAID CLAIMS.	DOCUMENT WITH RE	SPECT TO	O WHICH THIS	
INSR LTR TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMITS		
COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	0	
CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence	ce) \$	0	
							MED EXP (Any one perso	on) \$	0	
							PERSONAL & ADV INJUR	RY \$	0	
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	0	
POLICY PRO- JECT LOC							PRODUCTS - COMP/OP		0	
OTHER:							COMBINED SINGLE LIMI	\$ T •		
AUTOMOBILE LIABILITY ANY AUTO							(Ea accident)	Ψ		
OWNED SCHEDULED							BODILY INJURY (Per per	•		
AUTOS ONLY AUTOS NON-OWNED							BODILY INJURY (Per acc PROPERTY DAMAGE	sident) \$		
AUTOS ONLY AUTOS ONLY							(Per accident)	\$		
UMBRELLA LIAB OCCUB							EAGU GOOURDENIOE	·		
EXCESS LIAB CLAIMS-MADE							EACH OCCURRENCE	\$ \$		
OLAIMO-IMADE	-						AGGREGATE	\$		
WORKERS COMPENSATION							X PER O E	TH-		
AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE N			NOWC402000		00/01/2024	00/01/2025	E.L. EACH ACCIDENT		0,000	
A OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A		N9WC492808		09/01/2024	09/01/2025	E.L. DISEASE - EA EMPL			
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY L	LΟ	0,000	
Professional Liability (Errors &							Per Occurrence			
Omissions): Claims-Made							Aggregate			
,										
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACORD	0 101, Additional Remarks Schedu	le, may be	attached if more	e space is require	ed)			
CERTIFICATE HOLDER				CANO	ELLATION					
Midland Contractors LLC 7441 Oil Well Rd					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
Clermont, FL 34714				AUTHO	RIZED REPRESEI	NTATIVE	Pateul (Sypt		