

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/26/2023

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).

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| PRODUCER | | | | | | CONTACT NAME: | | | | | | |
| B&L Brokerage Services, Inc. (Direct) 111 Congressional Blvd | | | | | | PHONE (A/C, No, Ext): 800-644-5501 FAX (A/C, No): 317-715 | | | | | 5-9648 | |
| Carmel IN 46032 | | | | | | E-MAIL ADDRESS: | | | | | | |
| | | | | | | INSURER(S) AFFORDING COVERAGE NAIC # | | | | | | |
| License#: 544549 | | | | | | INSURER A: Protective Insurance Company, Inc. 12416 | | | | | | |
| | INSURED MAGNLTD-01 | | | | | INSURER B: | | | | | | |
| MAGNUM LTD; MAGNUM LTL, INC.; MAGNUM DEDICATED, INC.; MAGNUM LOGISTICS; MAGNUM WAREHOUSE; | | | | | INSURER C: | | | | | | | |
| AND MAGNUM INVESTMENTS LLC | | | | | INSURER D: | | | | | | | |
| 3000 7th Avenue NW | | | | | INSURER E : | | | | | | | |
| Fargo ND 58107-2023 | | | | | INSURER F: | | | | | | | |
| COVERAGES CERTIFICATE NUMBER: 1347409209 | | | | | | 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 | | | SUBR WVD | POLICY NUMBER | | POLICY EFF (MM/DD/YYYY) | POLICY EXP | LIMITS | | | | |
| A | | | WVD | X-2000 | | 10/1/2023 | 10/1/2024 | EACH OCCURRENCE | | \$1,000,000 | | |
| | CLAIMS-MADE X OCCUR | | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | | \$ | 1000 | |
| | | | | | | | | | | \$ | | |
| | | | | | | | | PERSONAL & ADV INJURY \$ | | | | |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | | | GENERAL AGGREGATE \$2,000 | | .000 | | |
| | X POLICY PRO- JECT LOC | | | | | | | PRODUCTS - COMP/OP AGG \$ | | | | |
| | OTHER: | | | | | | | | \$ | | | |
| A AUTOMOBILE LIABILITY | | | | X-2000 | | 10/1/2023 | 10/1/2024 | COMBINED SINGLE (Ea accident) | LIMIT | \$ 1,000 | ,000 | |
| | X ANY AUTO | | | | | BODILY INJURY (Per person) \$ | | | \$ | | | |
| | X OWNED SCHEDULED AUTOS AUTOS | | | | | | | BODILY INJURY (Pe | er accident) | \$ | | |
| | X HIRED X NON-OWNED AUTOS ONLY | | | | | | | PROPERTY DAMAG (Per accident) | GE | \$ | | |
| | NOTOS GNET | | | | | | | (* 0. 0.00.00.00.00) | | \$ | | |
| | UMBRELLA LIAB OCCUR | | | | | | | EACH OCCURRENG | CE | \$ | | |
| | EXCESS LIAB CLAIMS-MADE | : | | | | | | AGGREGATE | | \$ | | |
| | DED RETENTION\$ | | | | | | | | | \$ | | |
| | ORKERS COMPENSATION ND EMPLOYERS' LIABILITY | | | | | | PER STATUTE | OTH- ER | | | | |
| | ANYPROPRIETOR/PARTNER/EXECUTIVE T N | | | | | | | E.L. EACH ACCIDE | NT | \$ | | |
| OFFICER/MEMBER EXCLUDED? (Mandatory in NH) | | N/A | | | | | | E.L. DISEASE - EA | EMPLOYEE | \$ | | |
| If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | | | E.L. DISEASE - POL | LICY LIMIT | \$ | | |
| Α | Cargo Legal Liab | | | X-2000 | | 10/1/2023 | 10/1/2024 | \$250,000 | | Per O | ccurrence | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) In the event of policy cancellation or material change, written notice will be given to the certificate holder named hereon, at the address indicated, of such cancellation or material change within Thirty (30) days thereof. The above referenced policy is issued with a combined single limit and the total amount paid per occurrence under any of these coverages combined shall not exceed the limit shown in the policy. | | | | | | | | | | | | |
| COVERAGE DESCRIPTION: Cargo Legal Liability includes reefer breakdown. Cargo Legal Liability - 0 Deductible | | | | | | | | | | | | |
| CERTIFICATE HOLDER 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 | | | | | | |
| | | Justing E. Silvey | | | | | | | | | | |