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CERTIFICATE OF LIABILITY INSURANCE         12/28           THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDE DECRIFICATE DOES NOT AFRIKATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE P BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTH REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.           IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy (set) must have ADDITIONAL INSURED provisions or be et if SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A state this certificate does not conter rights to the certificate holder in lieu of such endorsement(s).           PRODUCER Hub International Mid-South 1661 International Drive Stute #300 Memphis, TN 38120         FMA (MC, No, Ett); (901) 312-5300         FMA (MC, No, Ett); (901) 312-5300         FMA (MC, No, Ett); (901) 312-5300           INSURER D         INSURER A: AMERISAN FORDING COVERAGE INSURER C: Hanover Insurance Company         22 MOK, No, Ett); (901) 312-5300         MAX, NO; MAX, NO;           INSURER D         INSURER E: INSURER C: Hanover Insurance Company         22 MAX, NO;         22 MAX, NO;           INSURER E:         INSURER E: INSURER C: Hanover Insurance Company         22 MAX, NO;         22 MAX, NO;           INSURER E:         CERTIFICATE NUMBER:         REVISION NUMBER:         INSURER F: INSURER C: HANOVE NOW ON THE RESPECT TO WE CERTIFICATE MAY RESULT ON THE RESPECT TO WE CERTIFICATE MAY RESULT ON INTERMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WI	MALFORD
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A       WORKERS COMPENSATION AND EMPLOYERS' LIABILITY OFFICER/MEMBER EXCLUDED?       Y/N N/A       X       WC 20994100801       1/1/2024       1/1/2025       X       PER STATUTE       OTH- ER         L       ELL EACH ACCIDENT       S         L       ELL DISEASE - EA EMPLOYEES       S	10,000,000
ANY PROPRIETOR/PARTNER/EXECUTIVE Y/N OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under	
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(Mandatory In NH) E.L. DISEASE - EA EMPLOYEE \$	1,000,000
DESCRIPTION OF OPERATIONS below	
	1,000,000
C Equipment Floater IH5 A827509 08 1/1/2024 1/1/2025 Rented/Leased Limit	450,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)	

DES Cer policies with respect to the services/work to be performed, only if required by written contract. A Waiver of Subrogation applies in favor of Certificate Holder for the General Liability, Auto Liability, Workers' Compensation, and Umbrella Liability policies only if required by written contract, only as permitted by law. All coverage is subject to policy terms and conditions.

OnPoint Group, LLC and their subsidiaries, all affiliates, officers, directors and employees are Additional Insureds only if required by written contract for General Liability as provided by attached endorsement. A Waiver of Subrogation applies in favor of Additional Insureds where required by contract for General 

CERTIFICATE HOLDER	CANCELLATION
OnPoint Group LLC etal Miner Ltd 3235 Levis Commons Blvd	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Perrysburg, OH 43551	AUTHORIZED REPRESENTATIVE
	Jon Mall The

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Page 1 of 1

ADDITIONAL RE	MARKS SCHEDULE
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AGENCY		NAMED INSURED	
Hub International Mid-South		Hi-Speed Industrial Service Mock, Inc. dba	
POLICY NUMBER		7030 Ryburn Drive Millington, TN 38053	
SEE PAGE 1			
CARRIER	NAIC CODE		
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

**Description of Operations/Locations/Vehicles:** 

Liability, Auto Liability and Workers' Compensation. Coverage is primary and noncontributory to any coverage carried by or on behalf of Certificate Holder. Should any of the above described policies be cancelled prior to the expiration date thereof, 30-day written notice, or 10-day notice for non-payment, will be provided to Certificate Holder in accordance with policy provisions where permitted by law.

# THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# CONTRACTOR'S BLANKET ADDITIONAL INSURED ENDORSEMENT FORM A

This endorsement modifies insurance provided under the following:

#### COMMERCIAL GENERAL LIABILITY COVERAGE PART

Policy Number	Agency Number	Policy Effective Date
CPP20994120602	0345685	01/01/2023
Policy Expiration Date	<b>Date</b>	Account Number
01/01/2024	12/29/2022	20065889
Named Insured HI-SPEED INDUSTRIAL SERVICE, MOCK, INC. DBA AND HI-SPEED, INC.	Agency HUB INTERNATIONAL MID-SOUTH	<b>Issuing Company</b> AMERISURE INSURANCE COMPANY

- 1. a. SECTION II -WHO IS AN INSURED is amended to add as an additional insured any person or organization:
  - (1) Whom you are required to add as an additional insured on this policy under a written contract or written agreement relating to your business; or
  - (2) Who is named as an additional insured under this policy on a certificate of insurance.
  - b. The written contract, written agreement, or certificate of insurance must:
    - (1) Require additional insured status for a time period during the term of this policy; and
    - (2) Be executed prior to the "bodily injury", "property damage", or "personal and advertising injury" leading to a claim under this policy.
  - c. If, however:
    - (1) "Your work" began under a letter of intent or work order; and
    - (2) The letter of intent or work order led to a written contract or written agreement within 30 days of beginning such work; and
    - (3) Your customer's customary contracts require persons or organizations to be named as additional insureds;

we will provide additional insured status as specified in this endorsement.

- 2. The insurance provided under this endorsement is limited as follows:
  - **a.** That person or organization is an additional insured only with respect to liability caused, in whole or in part, by:
    - (1) Premises you:
      - (a) Own;
      - (b) Rent;
      - (c) Lease; or
      - (d) Occupy;
    - (2) Ongoing operations performed by you or on your behalf. Ongoing operations does not apply to "bodily injury" or "property damage" occurring after:

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- (a) All work to be performed by you or on your behalf for the additional insured(s) at the site of the covered operations is complete, including related materials, parts or equipment (other than service, maintenance or repairs); or
- (b) That portion of "your work" out of which the injury or damage arises is put to its intended use by any person or organization other than another contractor working for a principal as a part of the same project.
- (3) Completed operations coverage, but only if:
  - (a) The written contract, written agreement, or certificate of insurance requires completed operations coverage or "your work" coverage; and
  - (b) This coverage part provides coverage for "bodily injury" or "property damage" included within the "products-completed operations hazard".

However, the insurance afforded to such additional insured only applies to the extent permitted by law.

- **b.** If the written contract, written agreement, or certificate of insurance:
  - (1) Requires "arising out of' language; or
  - (2) Requires you to provide additional insured coverage to that person or organization by the use of either or both of the following:
    - (a) Additional Insured Owners, Lessees or Contractors Scheduled Person Or Organization endorsement CG 20 10 10 01; or
    - (b) Additional Insured Owners, Lessees or Contractors Completed Operations endorsement CG 20371001;

then the phrase "caused, in whole or in part, by" in paragraph 2.a. above is replaced by "arising out of.

- c. If the written contract, written agreement, or certificate of insurance requires you to provide additional insured coverage to that person or organization by the use of:
  - Additional Insured Owners, Lessees or Contractors Scheduled Person Or Organization endorsement CG 20 10 07 04 or CG 20 10 04 13; or
  - (2) Additional Insured Owners, Lessees or Contractors Completed Operations endorsement CG 20 37 07 04 or CG 20 37 04 13; or
  - (3) Both those endorsements with either of those edition dates; or
  - (4) Either or both of the following:
    - (a) Additional Insured Owners, Lessees or Contractors Scheduled Person Or Organization endorsement CG 20 10 without an edition date specified; or
    - (b) Additional Insured Owners, Lessees or Contractors Completed Operations endorsement CG 20 37 without an edition date specified;

then paragraph **2.a.** above applies.

- **d.** Premises, as respects paragraph **2.a.(1)** above, include common or public areas about such premises if so required in the written contract or written agreement.
- e. Additional insured status provided under paragraphs 2.a.(1)(b) or 2.a.(1)(c) above does not extend beyond the end of a premises lease or rental agreement.
- **f.** The limits of insurance that apply to the additional insured are the least of those specified in the:
  - (1) Written contract;
  - (2) Written agreement;
  - (3) Certificate of insurance; or
  - (4) Declarations of this policy.

The limits of insurance are inclusive of and not in addition to the limits of insurance shown in the Declarations.

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- **g.** The insurance provided to the additional insured does not apply to "bodily injury", "property damage", or "personal and advertising injury" arising out of an architect's, engineer's, or surveyor's rendering of, or failure to render, any professional services, including but not limited to:
  - (1) The preparing, approving, or failing to prepare or approve:
    - **(a)** Maps;
    - (b) Drawings;
    - (c) Opinions;
    - (d) Reports;
    - (e) Surveys;
    - (f) Change orders;
    - (g) Design specifications; and
  - (2) Supervisory, inspection, or engineering services.
- h. SECTION IV COMMERCIAL GENERAL LIABILITY CONDITIONS, paragraph 4. Other Insurance is deleted and replaced with the following:
  - 4. Other Insurance.

Coverage provided by this endorsement is excess over any other valid and collectible insurance available to the additional insured whether:

- a. Primary;
- **b.** Excess;
- c. Contingent; or
- **d.** On any other basis;

but if the written contract, written agreement, or certificate of insurance requires primary and noncontributory coverage, this insurance will be primary and non-contributory relative to other insurance available to the additional insured which covers that person or organization as a Named Insured, and we will not share with that other insurance.

i. If the written contract, written agreement, or certificate of insurance as outlined above requires additional insured status by use of CG 20 10 11 85, then the coverage provided under this CG 70 48 endorsement does not apply except for paragraph **2.h. Other Insurance**. Additional insured status is limited to that provided by CG 20 10 11 85 shown below and paragraph **2.h. Other Insurance** shown above.

# ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS (FORM B)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

## SCHEDULE

**Name of Person or Organization:** Blanket Where Required by Written Contract, Agreement, or Certificate of Insurance that the terms of CG 20 10 11 85 apply

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of "your work" for that insured by or for you.

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**j.** The insurance provided by this endorsement does not apply to any premises or work for which the person or organization is specifically listed as an additional insured on another endorsement attached to this policy.