



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
12/22/2020

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.

PRODUCER Harris, Madden, Powell, Stallings & Brown, Inc. PO Box 381708 Memphis, TN 38183-1708	CONTACT NAME: Ashley Murray		
	PHONE (A/C, No, Ext): (901) 316-1019	FAX (A/C, No): (901) 853-9943	
	E-MAIL ADDRESS: amurray@hmpins.com		
	PRODUCER CUSTOMER ID: HI-SIND-CL		
INSURED Hi-Speed Industrial Service Mock, Inc. DBA 7030 Ryburn Drive Millington, TN 38053	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Travelers Casualty & Surety		31194
	INSURER B :		
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

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		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	<input type="checkbox"/>	PROPERTY				BUILDING	\$
	<input type="checkbox"/>	CAUSES OF LOSS				PERSONAL PROPERTY	\$
	<input type="checkbox"/>	BASIC				BUSINESS INCOME	\$
	<input type="checkbox"/>	BROAD				EXTRA EXPENSE	\$
	<input type="checkbox"/>	SPECIAL				RENTAL VALUE	\$
	<input type="checkbox"/>	EARTHQUAKE				BLANKET BUILDING	\$
	<input type="checkbox"/>	WIND				BLANKET PERS PROP	\$
	<input type="checkbox"/>	FLOOD				BLANKET BLDG & PP	\$
	<input type="checkbox"/>						\$
	<input type="checkbox"/>						\$
	<input type="checkbox"/>	INLAND MARINE	TYPE OF POLICY				\$
	<input type="checkbox"/>	CAUSES OF LOSS					\$
	<input type="checkbox"/>	NAMED PERILS	POLICY NUMBER				\$
	<input type="checkbox"/>						\$
A	X	CRIME	0106434800LB	01/01/2021	01/01/2022	X Employee Theft of Client	\$ 500,000
		TYPE OF POLICY					\$
		Crime					\$
							\$
	<input type="checkbox"/>	BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$
							\$
							\$
							\$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

CBRE, Inc
c/o GRMS
4447 N Central Expressway
Ste 110-433
Dallas, TX 75205

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



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
12/22/2020

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PRODUCER	CONTACT NAME: Ashley Murray	
Harris, Madden, Powell, Stallings & Brown, Inc.	PHONE (A/C, No, Ext): (901) 316-1019	
PO Box 381708	FAX (A/C, No): (901) 853-9943	
Memphis, TN 38183-1708	E-MAIL ADDRESS: amurray@hmpins.com	
	PRODUCER CUSTOMER ID: HI-SIND-CL	
	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED	INSURER A : Travelers Casualty & Surety	31194
Hi-Speed Industrial Service	INSURER B :	
Mock, Inc. DBA	INSURER C :	
7030 Ryburn Drive	INSURER D :	
Millington, TN 38053	INSURER E :	
	INSURER F :	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

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INSR LTR	TYPE OF INSURANCE		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	<input type="checkbox"/> PROPERTY					BUILDING	\$
	CAUSES OF LOSS	DEDUCTIBLES				PERSONAL PROPERTY	\$
	<input type="checkbox"/> BASIC	BUILDING				BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD	CONTENTS				EXTRA EXPENSE	\$
	<input type="checkbox"/> SPECIAL					RENTAL VALUE	\$
	<input type="checkbox"/> EARTHQUAKE					BLANKET BUILDING	\$
	<input type="checkbox"/> WIND					BLANKET PERS PROP	\$
	<input type="checkbox"/> FLOOD					BLANKET BLDG & PP	\$
							\$
							\$
	<input type="checkbox"/> INLAND MARINE		TYPE OF POLICY				\$
	CAUSES OF LOSS						\$
	<input type="checkbox"/> NAMED PERILS		POLICY NUMBER				\$
							\$
A	<input checked="" type="checkbox"/> CRIME					<input checked="" type="checkbox"/> Employee Theft of Client	\$ 500,000
	TYPE OF POLICY						\$
	Crime		0106434800LB	01/01/2021	01/01/2022		\$
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN						\$
							\$
							\$
							\$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

L'Oréal USA, Inc. and subsidiaries
50 Connell Drive
Berkeley Heights, NJ 07922

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



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
12/22/2020

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PRODUCER Harris, Madden, Powell, Stallings & Brown, Inc. PO Box 381708 Memphis, TN 38183-1708	CONTACT NAME: Ashley Murray		
	PHONE (A/C, No, Ext): (901) 316-1019	FAX (A/C, No): (901) 853-9943	
	E-MAIL ADDRESS: amurray@hmpins.com		
	PRODUCER CUSTOMER ID: HI-SIND-CL		
INSURED Hi-Speed Industrial Service Mock, Inc. DBA 7030 Ryburn Drive Millington, TN 38053	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Travelers Casualty & Surety		31194
	INSURER B :		
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER: 1

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

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	<input type="checkbox"/>	PROPERTY				BUILDING	\$
	<input type="checkbox"/>	CAUSES OF LOSS				PERSONAL PROPERTY	\$
	<input type="checkbox"/>	BASIC				BUSINESS INCOME	\$
	<input type="checkbox"/>	BROAD				EXTRA EXPENSE	\$
	<input type="checkbox"/>	SPECIAL				RENTAL VALUE	\$
	<input type="checkbox"/>	EARTHQUAKE				BLANKET BUILDING	\$
	<input type="checkbox"/>	WIND				BLANKET PERS PROP	\$
	<input type="checkbox"/>	FLOOD				BLANKET BLDG & PP	\$
	<input type="checkbox"/>						\$
	<input type="checkbox"/>						\$
	<input type="checkbox"/>	INLAND MARINE	TYPE OF POLICY				\$
	<input type="checkbox"/>	CAUSES OF LOSS					\$
	<input type="checkbox"/>	NAMED PERILS	POLICY NUMBER				\$
	<input type="checkbox"/>						\$
A	X	CRIME	0106434800LB	01/01/2021	01/01/2022	X Employee Theft of Client	\$ 500,000
		TYPE OF POLICY					\$
		Crime					\$
							\$
	<input type="checkbox"/>	BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$
							\$
							\$
							\$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

Nucor Corporation
PO Box 30
Armored, AR 72310

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



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PRODUCER	CONTACT NAME: Ashley Murray	PHONE (A/C, No, Ext): (901) 316-1019	FAX (A/C, No): (901) 853-9943
Harris, Madden, Powell, Stallings & Brown, Inc. PO Box 381708 Memphis, TN 38183-1708	E-MAIL ADDRESS: amurray@hmpins.com	PRODUCER CUSTOMER ID: HI-SIND-CL	
INSURED	INSURER(S) AFFORDING COVERAGE		NAIC #
Hi-Speed Industrial Service Mock, Inc. DBA 7030 Ryburn Drive Millington, TN 38053	INSURER A : Travelers Casualty & Surety		31194
	INSURER B :		
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

COVERAGES

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LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

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	<input type="checkbox"/>	PROPERTY				BUILDING	\$
	<input type="checkbox"/>	CAUSES OF LOSS				PERSONAL PROPERTY	\$
	<input type="checkbox"/>	BASIC				BUSINESS INCOME	\$
	<input type="checkbox"/>	BROAD				EXTRA EXPENSE	\$
	<input type="checkbox"/>	SPECIAL				RENTAL VALUE	\$
	<input type="checkbox"/>	EARTHQUAKE				BLANKET BUILDING	\$
	<input type="checkbox"/>	WIND				BLANKET PERS PROP	\$
	<input type="checkbox"/>	FLOOD				BLANKET BLDG & PP	\$
	<input type="checkbox"/>						\$
	<input type="checkbox"/>						\$
	<input type="checkbox"/>	INLAND MARINE	TYPE OF POLICY				\$
	<input type="checkbox"/>	CAUSES OF LOSS					\$
	<input type="checkbox"/>	NAMED PERILS	POLICY NUMBER				\$
	<input type="checkbox"/>						\$
A	X	CRIME	0106434800LB	01/01/2021	01/01/2022	X Employee Theft of Client	\$ 500,000
		TYPE OF POLICY					\$
		Crime					\$
							\$
	<input type="checkbox"/>	BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$
	<input type="checkbox"/>						\$
	<input type="checkbox"/>						\$
	<input type="checkbox"/>						\$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

Nucor Steel Jackson, Inc.
3630 Fourth Street
Flowood, MS 39232-2000

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

JOINT LOSS PAYABLE ENDORSEMENT

This endorsement modifies the following coverage:

Crime

It is agreed that:

1. This endorsement modifies all Insuring Agreements forming part of this **Crime Policy**, unless specified below as indicated by the corresponding ☒ and then only to those so indicated:
 - ☐ A. FIDELITY
 - ☐ Employee Theft ☐ ERISA Fidelity ☒ Employee Theft of Client Property
 - ☐ B. FORGERY OR ALTERATION
 - ☐ C. ON PREMISES
 - ☐ D. IN TRANSIT
 - ☐ E. MONEY ORDERS AND COUNTERFEIT MONEY
 - ☐ F. COMPUTER CRIME
 - ☐ Computer Fraud ☐ Computer Program and Electronic Data Restoration Expense
 - ☐ G. FUNDS TRANSFER FRAUD
 - ☐ H. PERSONAL ACCOUNTS PROTECTION
 - ☐ I. CLAIM EXPENSE
2. The **Insured** agrees that any loss payable under the Insuring Agreement(s) indicated above and involving **Money** or **Other Property** in which the designated Loss Payee has an interest shall be paid jointly to the **Named Insured** and to the Loss Payee designated below:

<u>Loss Payee Name</u>	<u>Loss Payee Address</u>
Nucor Steel Jackson, Inc.	3630 Fourth Street, Flowood, MS 39232-2000
Nucor Corporation	P.O. Box 30, Armorel, AR 72310
3. The **Company's** liability under the Insuring Agreement(s) indicated above as extended by this endorsement are not cumulative.
4. No rights or benefits are bestowed on the Loss Payee other than payment of the loss as set forth herein.

Nothing herein contained shall be held to vary, alter, waive or extend any of the terms, conditions, exclusions or limitations of the above-mentioned policy, except as expressly stated herein. This endorsement is part of such policy and incorporated therein.

Issuing Company: Travelers Casualty and Surety Company of America

Policy Number: 106434800



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
12/22/2020

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PRODUCER	CONTACT NAME: Ashley Murray	PHONE (A/C, No, Ext): (901) 316-1019	FAX (A/C, No): (901) 853-9943
Harris, Madden, Powell, Stallings & Brown, Inc. PO Box 381708 Memphis, TN 38183-1708	E-MAIL ADDRESS: amurray@hmpins.com	PRODUCER CUSTOMER ID: HI-SIND-CL	
INSURED	INSURER(S) AFFORDING COVERAGE		NAIC #
Hi-Speed Industrial Service Mock, Inc. DBA 7030 Ryburn Drive Millington, TN 38053	INSURER A : Travelers Casualty & Surety		31194
	INSURER B :		
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Sites in which work performed by Named Insured as required by contract under Certificate Holder.

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INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	<input type="checkbox"/> PROPERTY					
	CAUSES OF LOSS	DEDUCTIBLES			BUILDING	\$
					PERSONAL PROPERTY	\$
	<input type="checkbox"/> BASIC	BUILDING			BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD	CONTENTS			EXTRA EXPENSE	\$
	<input type="checkbox"/> SPECIAL				RENTAL VALUE	\$
	<input type="checkbox"/> EARTHQUAKE				BLANKET BUILDING	\$
	<input type="checkbox"/> WIND				BLANKET PERS PROP	\$
	<input type="checkbox"/> FLOOD				BLANKET BLDG & PP	\$
						\$
						\$
	<input type="checkbox"/> INLAND MARINE	TYPE OF POLICY				\$
	CAUSES OF LOSS					\$
	<input type="checkbox"/> NAMED PERILS	POLICY NUMBER				\$
						\$
A	<input checked="" type="checkbox"/> CRIME				<input checked="" type="checkbox"/> Employee Theft of Client	\$ 500,000
	TYPE OF POLICY					\$
	Crime	0106434800LB	01/01/2021	01/01/2022		\$
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$
						\$
						\$
						\$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Nucor Steel Memphis, Inc. is Loss Payee with respect to Crime/Fidelity/Employee Theft of Client Property evidenced herein as required by contract.

CERTIFICATE HOLDER

CANCELLATION

Nucor Steel Memphis, Inc.
3601 Paul R Lowry Rd
Memphis, TN 38109

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

JOINT LOSS PAYABLE ENDORSEMENT

This endorsement modifies the following coverage:

Crime

It is agreed that:

1. This endorsement modifies all Insuring Agreements forming part of this **Crime Policy**, unless specified below as indicated by the corresponding ☒ and then only to those so indicated:
 - ☐ A. FIDELITY
 - ☐ Employee Theft ☐ ERISA Fidelity ☒ Employee Theft of Client Property
 - ☐ B. FORGERY OR ALTERATION
 - ☐ C. ON PREMISES
 - ☐ D. IN TRANSIT
 - ☐ E. MONEY ORDERS AND COUNTERFEIT MONEY
 - ☐ F. COMPUTER CRIME
 - ☐ Computer Fraud ☐ Computer Program and Electronic Data Restoration Expense
 - ☐ G. FUNDS TRANSFER FRAUD
 - ☐ H. PERSONAL ACCOUNTS PROTECTION
 - ☐ I. CLAIM EXPENSE
2. The **Insured** agrees that any loss payable under the Insuring Agreement(s) indicated above and involving **Money** or **Other Property** in which the designated Loss Payee has an interest shall be paid jointly to the **Named Insured** and to the Loss Payee designated below:

Loss Payee Name

Nucor Steel Memphis, Inc.

Loss Payee Address

**3601 Paul R Lowry Rd
Memphis TN 38109**
3. The **Company's** liability under the Insuring Agreement(s) indicated above as extended by this endorsement are not cumulative.
4. No rights or benefits are bestowed on the Loss Payee other than payment of the loss as set forth herein.

Nothing herein contained shall be held to vary, alter, waive or extend any of the terms, conditions, exclusions or limitations of the above-mentioned policy, except as expressly stated herein. This endorsement is part of such policy and incorporated therein.

Issuing Company: Travelers Casualty and Surety Company of America

Policy Number: 106434800



CERTIFICATE OF PROPERTY INSURANCE

AMURRAY

DATE (MM/DD/YYYY)
12/22/2020

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PRODUCER Harris, Madden, Powell, Stallings & Brown, Inc. PO Box 381708 Memphis, TN 38183-1708		CONTACT NAME: Ashley Murray PHONE (A/C, No, Ext): (901) 316-1019 FAX (A/C, No): (901) 853-9943 E-MAIL ADDRESS: amurray@hmpins.com PRODUCER CUSTOMER ID: HI-SIND-CL	
INSURED Hi-Speed Industrial Service Mock, Inc. DBA 7030 Ryburn Drive Millington, TN 38053		INSURER(S) AFFORDING COVERAGE INSURER A : Travelers Casualty & Surety INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :	NAIC # 31194

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER: 2

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Sites work performed by Named Insured including, but not limited to: 5929 E State Highway 18 and 6061 E State Highway 18, Blytheville AR 72315

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	<input type="checkbox"/>	PROPERTY				BUILDING	\$
	<input type="checkbox"/>	CAUSES OF LOSS				PERSONAL PROPERTY	\$
	<input type="checkbox"/>	BASIC				BUSINESS INCOME	\$
	<input type="checkbox"/>	BROAD				EXTRA EXPENSE	\$
	<input type="checkbox"/>	SPECIAL				RENTAL VALUE	\$
	<input type="checkbox"/>	EARTHQUAKE				BLANKET BUILDING	\$
	<input type="checkbox"/>	WIND				BLANKET PERS PROP	\$
	<input type="checkbox"/>	FLOOD				BLANKET BLDG & PP	\$
	<input type="checkbox"/>						\$
	<input type="checkbox"/>						\$
	<input type="checkbox"/>	INLAND MARINE	TYPE OF POLICY				\$
	<input type="checkbox"/>	CAUSES OF LOSS					\$
	<input type="checkbox"/>	NAMED PERILS	POLICY NUMBER				\$
	<input type="checkbox"/>						\$
A	X	CRIME	0106434800LB	01/01/2021	01/01/2022	X Employee Theft of Client	\$ 500,000
		TYPE OF POLICY					\$
		Crime					\$
							\$
	<input type="checkbox"/>	BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$
	<input type="checkbox"/>						\$
	<input type="checkbox"/>						\$
	<input type="checkbox"/>						\$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Nucor-Yamato Steel Company and Nucor Castrip Arkansas, LLC are named as Loss Payees on the aforementioned Crime/Fidelity/Employee Theft of Client Property evidenced herein and on the attached corresponding endorsement.

CERTIFICATE HOLDER

CANCELLATION

Nucor-Yamato Steel Company and Nucor Castrip Arkansas, LLC 5929 E State Hwy 18, 6061 E State Hwy 18 or 5937 E State Hwy 18 Blytheville, AR 72315	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 
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JOINT LOSS PAYABLE ENDORSEMENT

This endorsement modifies the following coverage:

Crime

It is agreed that:

1. This endorsement modifies all Insuring Agreements forming part of this **Crime Policy**, unless specified below as indicated by the corresponding ☒ and then only to those so indicated:
 - ☐ A. FIDELITY
 - ☐ Employee Theft ☐ ERISA Fidelity ☒ Employee Theft of Client Property
 - ☐ B. FORGERY OR ALTERATION
 - ☐ C. ON PREMISES
 - ☐ D. IN TRANSIT
 - ☐ E. MONEY ORDERS AND COUNTERFEIT MONEY
 - ☐ F. COMPUTER CRIME
 - ☐ Computer Fraud ☐ Computer Program and Electronic Data Restoration Expense
 - ☐ G. FUNDS TRANSFER FRAUD
 - ☐ H. PERSONAL ACCOUNTS PROTECTION
 - ☐ I. CLAIM EXPENSE
2. The **Insured** agrees that any loss payable under the Insuring Agreement(s) indicated above and involving **Money** or **Other Property** in which the designated Loss Payee has an interest shall be paid jointly to the **Named Insured** and to the Loss Payee designated below:

Loss Payee Name

Loss Payee Address

**Nucor-Yamato Steel Company
and Nucor Castrip Arkansas, LLC**

**5929 E State Hwy 18, Blytheville, AR 72315
6061 E State Hwy 18, Blytheville, AR 72315**

and any such payment shall constitute payment to the **Insured**. The Company agrees to make all such payments to the **Named Insured** and to the Loss Payee, and the Company will not make any payment solely to the **Named Insured** unless the Company receives a request in writing from the Loss Payee to make such payment solely to the **Insured**.

3. The **Company's** liability under the Insuring Agreement(s) indicated above as extended by this endorsement are not cumulative.
4. No rights or benefits are bestowed on the Loss Payee other than payment of the loss as set forth herein.

Nothing herein contained shall be held to vary, alter, waive or extend any of the terms, conditions, exclusions or limitations of the above-mentioned policy, except as expressly stated herein. This endorsement is part of such policy and incorporated therein.

Issuing Company: Travelers Casualty and Surety Company of America

Policy Number: 106434800



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
12/22/2020

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.

PRODUCER	CONTACT NAME: Ashley Murray	
Harris, Madden, Powell, Stallings & Brown, Inc.	PHONE (A/C, No, Ext): (901) 316-1019	FAX (A/C, No): (901) 853-9943
PO Box 381708	E-MAIL ADDRESS: amurray@hmpins.com	
Memphis, TN 38183-1708	PRODUCER CUSTOMER ID: HI-SIND-CL	
	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED	INSURER A : Travelers Casualty & Surety	31194
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER: 1

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

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	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	<input type="checkbox"/> PROPERTY					
	CAUSES OF LOSS	DEDUCTIBLES			BUILDING	\$
					PERSONAL PROPERTY	\$
	<input type="checkbox"/> BASIC	BUILDING			BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD	CONTENTS			EXTRA EXPENSE	\$
	<input type="checkbox"/> SPECIAL				RENTAL VALUE	\$
	<input type="checkbox"/> EARTHQUAKE				BLANKET BUILDING	\$
	<input type="checkbox"/> WIND				BLANKET PERS PROP	\$
	<input type="checkbox"/> FLOOD				BLANKET BLDG & PP	\$
						\$
						\$
	<input type="checkbox"/> INLAND MARINE	TYPE OF POLICY				\$
	CAUSES OF LOSS					\$
	<input type="checkbox"/> NAMED PERILS	POLICY NUMBER				\$
						\$
A	<input checked="" type="checkbox"/> CRIME				<input checked="" type="checkbox"/> Employee Theft of Client	\$ 500,000
	TYPE OF POLICY					\$
	Crime	0106434800LB	01/01/2021	01/01/2022		\$
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$
						\$
						\$
						\$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

The Hershey Company, its parents, subsidiaries, divisions, affiliates, directors, officers and assigns
19 East Chocolate Avenue
Hershey, PA 17033

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