

CERTIFICATE OF PROPERTY INSURANCE

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

AMURRAY

C B	ERT ELC	IFICATE DO W. THIS C	ES NOT AFFI ERTIFICATE C	AS A MATTER OF INFORMATION RMATIVELY OR NEGATIVELY AM OF INSURANCE DOES NOT CONS ER, AND THE CERTIFICATE HOLDE	END, EXTEND OR STITUTE A CONTR ER.	ALTER THE CO	OVEF	RAGE AFFORDED	BY TH	E POLICIES	
PRO	DUCE	R				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 FAX FAX FAX FAX					
			ell, Stallings &	Brown, Inc.	PHONE (A/C, No, Ext): (9						
		381708 s TN 38183-1	708		E-MAIL ADDRESS: amu						
Memphis, TN 38183-1708						PRODUCER CUSTOMER ID: HI-SIND-CL					
					OCOTOMERID.	INSURER(S) AFFORDING COVERAGE				NAIC #	
INSL	RED					INSURER A : Travelers Casualty & Surety				31194	
			d la du staist Cs			INSURER B :					
		HI-Spee Mock. Ir	d Industrial Se	rvice		INSURER C :					
		,	burn Drive			INSURER D :					
		Millingto	on, TN 38053			INSURER E :					
						INSURER F : REVISION NUMBER:					
		AGES		CERTIFICATE NUMBER:	INSURER F :						
LOC Site:	ATION S in V	N OF PREMISES / which work pe	erformed by Na	PROPERTY (Attach ACORD 101, Additional Ren med Insured as required by contract	under Certificate Hol	ace is required) Ider.					
	IDIC/ ERTI	ATED. NOTWI ⁻ IFICATE MAY B	THSTANDING AN BE ISSUED OR M	NESS OF INSOLAINCE LISTED BELOWT NY REQUIREMENT, TERM OR CONDITI IAY PERTAIN, THE INSURANCE AFFOR SUCH POLICIES. LIMITS SHOWN MAY	ON OF ANY CONTRAC DED BY THE POLICIE	CT OR OTHER DOC	UME	NT WITH RESPECT TO	o whic	CH THIS	
INSR LTR		TYPE OF IN	SURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	c	OVERED PROPERTY		LIMITS	
		PROPERTY						BUILDING	\$		
	CAL	JSES OF LOSS	DEDUCTIBLES					PERSONAL PROPERTY	\$		
		BASIC	BUILDING					BUSINESS INCOME	\$		
		BROAD		_				EXTRA EXPENSE	\$		
		SPECIAL	CONTENTS					RENTAL VALUE	\$		
		EARTHQUAKE		_				BLANKET BUILDING	\$		
		WIND						BLANKET PERS PROP	\$		
		FLOOD						BLANKET BLDG & PP	\$		
		12000		-				BEANINE I BEBO GI I	\$		
				-							
			-						\$		
	-		=	TYPE OF POLICY					\$		
	CAL	JSES OF LOSS			_				\$		
		NAMED PERILS		POLICY NUMBER					\$		
	v						×	Employee Theft of Client	\$	500,000	
A	X						X		\$	500,000	
		PE OF POLICY			04/04/0004	04/04/0000			\$		
	Cr	ime		0106434800LB	01/01/2021	01/01/2022			\$		
		BOILER & MACH EQUIPMENT BR	HINERY / EAKDOWN				\square		\$		
									\$		
									\$		
									\$		
				(ACORD 101, Additional Remarks Schedule, ma yee with respect to Crime/Fidelity/Em			nced I	herein as required by	y contr	act.	
CE	RTIF		DER		CANCELLAT	ION					
		Nucor S 3601 Pa	iteel Memphis, ul R Lowry Rd s, TN 38109		SHOULD AN THE EXPIRA	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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