

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/8/2024

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 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:						
York International Agency, LLC					PHONE (A/C, No, Ext): 914-376-2200 FAX (A/C, No): 914-376-2891						6-2891	
Attn. bartlettcert@yorkintl.com 500 Mamaroneck Avenue						E-MAIL ADDRESS: info@yorkintl.com						
Harrison NY 10528						INSURER(S) AFFORDING COVERAGE NAIC #						
						INSURER A: Travelers Casualty and Surety Company 19038						
INSURED						, , , ,						
The F.A. Bartlett Tree Expert Company												
1290 East Main Street					INSURER C:							
Stamford CT 06902					INSURER D:							
						INSURER E :						
						INSURER F:						
COVERAGES CERTIFICATE NUMBER: 1317421402												
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			ADDL SUBR NSD WVD POLICY NUMBER			POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMITS				
В	EIK			TC2J-GLSA-1005A129-TIL-2	24	12/1/2024	12/1/2025	EACH OCCURRENCE \$2,000		000		
						, ., _ 0	.2, .,2020	DAMAGE TO RENTED				
	GEN'L AGGREGATE LIMIT APPLIES PER:							PREMISES (Ea occurrence)		\$2,000,000		
										\$ 10,00		
										\$2,000		
										\$ 5,000		
	X POLICY PRO- JECT LOC							PRODUCTS - COMP.		\$4,000	,000	
OTHER:								COMBINED SINGLE		\$	000	
В	B AUTOMOBILE LIABILITY			TC2J-CAP-1005A130-TIL-24		12/1/2024	12/1/2025	(Ea accident)	\$ 3,000,000		,000	
	X ANY AUTO OWNED SCHEDULED	ANY AUTO						BODILY INJURY (Per		\$		
	AUTOS ONLY AUTOS							BODILY INJURY (Per		\$		
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY							PROPERTY DAMAGI (Per accident)		\$		
								\$				
	UMBRELLA LIAB OCCUR							EACH OCCURRENC	E	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE		\$		
	DED RETENTION\$							\$				
A B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			UB-7N673715-24-51-R		12/1/2024	12/1/2025	PER STATUTE	OTH- ER			
	YPROPRIETOR/PARTNER/EXECUTIVE TIME OB-711701450-24-3			UB-/N/81486-24-51-K		12/1/2024	12/1/2025	E.L. EACH ACCIDEN	IDENT \$1,000,		,000	
OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below								E.L. DISEASE - EA EMPLOYEE \$ 1,000		,000		
								E.L. DISEASE - POLICY LIMIT \$ 1,000		,000		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)												
Proof of Insurance.												
OFFICIAL HOLDER												
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						
		A. O Mellette.										