



# CERTIFICATE OF INSURANCE

SHELTER MUTUAL INSURANCE COMPANY  
A MUTUAL COMPANY

SHELTER GENERAL INSURANCE COMPANY  
A STOCK COMPANY

Name & Address To Whom Issued:

Name & Address of the Insured:  
**PASSOW REMODELING, LLC**  
**1900 SW URISH RD**  
**TOPEKA, KS 66615-1308**

This is to certify that insurance policies as indicated below by policy number have been issued.

Company	Type of Insurance	Policy Number	Expiration Date	Limits of Liability
Shelter Mutual	General Liability: <input checked="" type="checkbox"/> Premises & Operations <input checked="" type="checkbox"/> Products/Completed  Operations Provided? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	15-31-3770553-3	04/10/2016	500,000 Per Occurrence   1,000,000 Aggregate * Products/Completed Operations For: (Describe) <b>CARPENTRY - CONSTRUCTION OF RESIDENTIAL PROPERTY NOT EXCEEDING THREE STORIES IN HEIGHT</b> <b>HANDYPERSON</b>  * The Limits of Liability for any indicated General Liability policy are the limits at the time the policy is issued. The aggregate limit is, and other limits may be, reduced by the amount of claim payments.
Shelter General	Garage Liability			Single Limit BI Per Person BI Per Accident   PD Per Accident
<input type="checkbox"/> Shelter Mutual <input checked="" type="checkbox"/> Shelter General	Automobile <input type="checkbox"/> All Owned or Leased Autos <input checked="" type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non Owned Autos	15-1-C-3770553-5	3/11/2016	300,000 Single Limit BI Per Person BI Per Accident   PD Per Accident
Shelter Mutual	Apartment Owner's/ Rental Dwelling			Per Occurrence
Shelter Mutual	Business			Per Occurrence
Shelter Mutual	Cargo - Scheduled Auto/Trailers			Per Vehicle
<input type="checkbox"/> Shelter Mutual <input type="checkbox"/> Shelter General				

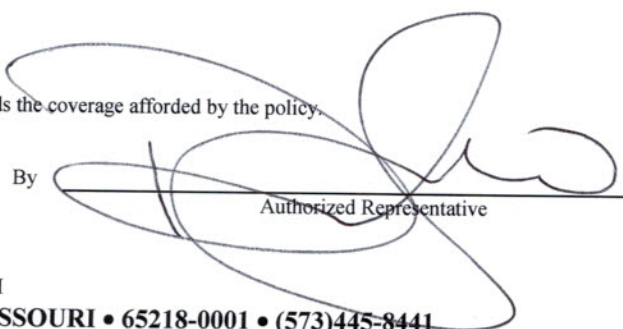
Year Model  
2011

VEHICLE(S)  
Trade Name  
Ford 3500 Cutaway

Motor Serial No. (Last 5 Digits)  
32272

This Certificate of Insurance neither affirmatively nor negatively amends, alters or extends the coverage afforded by the policy.

Date 1/14/2016

By   
Authorized Representative