

CERTIFICATE OF INSURANCE FOR INFORMATION PURPOSES ONLY

«WRITINGCOMPANYNAME»

Issued Date:

Agency:

Insured:

Effective Date:

Expiration Date:

Type of Insurance:

Policy Number:

Policy Premium:

Renters

Property Location:

SECTION I – PROPERTY COVERAGE LIMITS

SECTION II – LIABILITY COVERAGE LIMITS

C	D
PERSONAL PROPERTY	LOSS OF USE

E	F
PERSONAL LIABILITY	MEDICAL PAYMENTS TO OTHERS

<i>each occurrence</i>	\$25,000 <i>each occurrence</i>
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Loss Deductible for Section I:

Wind/Hail Deductible:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED ABOVE 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.

CERTIFICATE HOLDER:

AUTHORIZED REPRESENTATIVE

Date: «CurrentDate»«TableEnd:PolicyInfo»