



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/29/2015

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 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).

PRODUCER Hays Companies 1200 Main Street, Suite #2310 Kansas City MO 64105	CONTACT NAME: PHONE (A/C No. Ext): (816) 474-3535		FAX (A/C No.): (816) 842-5795
	E-MAIL ADDRESS:		
INSURED D&L Transport, LLC 10540 Marty St Suite 160 Overland Park KS 66212	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Capitol Specialty Ins. Corp.		10328
	INSURER B: Nationwide Mutual		23787
	INSURER C: StarStone National Insurance Co		25496
	INSURER D: Riverport Insurance Company		36684
	INSURER E: TT Club Mutual Insurance Ltd		84975
INSURER F:			

COVERAGES **CERTIFICATE NUMBER:** Trans Op/GL/AL/WC/Car/UL **REVISION NUMBER:**

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY						EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			CS02509303-02	4/1/2016	4/1/2017	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 250,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000
E	<input checked="" type="checkbox"/> Transport Operator Liab			51727/2015/001	11/6/2015	4/1/2017	PERSONAL & ADV INJURY \$ n/a
	GEN'L AGGREGATE LIMIT APPLIES PER:			Transport Operator Liab			GENERAL AGGREGATE \$ 1,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY						Capitol GL - Agg/Each Occ \$ 2,000,000
	<input type="checkbox"/> ANY AUTO			ACP 3026464037	12/12/2015	12/12/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS						BODILY INJURY (Per person) \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> EXCESS LIAB			73524L151ALI	4/1/2016	4/1/2017	PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000						Comp/Coll Ded \$ 500/500
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						EACH OCCURRENCE \$ 1,000,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		Y/N	KSARP304018	4/1/2016	4/1/2017	AGGREGATE \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				
							<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER
E	Cargo Liabilities			51727/2015/001	11/6/2015	4/1/2017	E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Insurer E, E&O Limit \$100,000, Policy #51727/2015/001, Policy Limit \$100,000, Policy Term 11/6/15-4/1/17.
Transport Operators Liability provides coverage to D&L Transport as a broker who arranges transport of cargo using third-party motor carriers. Transport Broker Liability including Non-Owned and Hired Autos.

CERTIFICATE HOLDER

CANCELLATION

EVIDENCE OF INSURANCE

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

James Hays/CMADRI