Client#: 1591677 140MANDEDEC

$ACORD_{\scriptscriptstyle{\sqcap}}$

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/09/2016

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	CONTACT Donna Wilson					
BB&T-Atlantic Risk Management	PHONE (A/C, No, Ext): 410 480-4430 FAX (A/C, No): 80	866-548-4197				
5850 Waterloo Road, Suite 240	E-MAIL ADDRESS: dfwilson@bbandt.com					
Columbia, MD 21045	INSURER(S) AFFORDING COVERAGE	NAIC #				
410 480-4400	INSURER A: Selective Insurance Co of the S	39926				
INSURED	INSURER B: Builders Premier Insurance Comp	13036				
Manders Decorating Co Inc 9141 Brookville Road Silver Spring, MD 20910-1809	INSURER C: Travelers Casualty & Surety Com	19038				
	INSURER D:					
	INSURER E:					
	INSURER F:					

COVERAGES CERTIFICATE NUMBER: 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)	LIMIT	S
Α	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	Х	X	S2168488	04/28/2016	04/28/2017	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000 \$100,000
	X PD Ded:250						MED EXP (Any one person)	\$10,000
							PERSONAL & ADV INJURY	\$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$3,000,000
	POLICY X PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$3,000,000
	OTHER:							\$
Α	AUTOMOBILE LIABILITY			S2168488	04/28/2016	04/28/2017	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	ANY AUTO						BODILY INJURY (Per person)	\$
	ALL OWNED AUTOS AUTOS						BODILY INJURY (Per accident)	\$
	X HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
								\$
Α	X UMBRELLA LIAB X OCCUR			S2168488	04/28/2016	04/28/2017	EACH OCCURRENCE	\$10,000,000
	EXCESS LIAB CLAIMS-MADE			Over GL/AL/EL			AGGREGATE	\$10,000,000
	DED DETENTION \$							\$
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			PWC1010853	04/28/2016	04/28/2017	X PER OTH- STATUTE ER	
	OFFICER/MEMBER EXCLUDED?	N/A		MD/DC/VA			E.L. EACH ACCIDENT	\$1,000,000
	(Mandatory in NH)	,,					E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000,000
С	3rd Party Crime			106015082	11/01/2015	11/01/2017	100,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: BMG Laurel, LLC is named as Additional Insured on this policy

CERTIFICATE HOLDER								
	BMG Laurel, LLC							

9811 Mallard Dr. (Suite 214) Laurel, MD 20708 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

Julian conn

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