



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFFERS 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).

PRODUCER Great Lakes Ins Partners 5215 Monroe Street, Suite 2 Toledo OH 43623	CONTACT NAME: PHONE (A/C, No, Ext): 419-841-2000	FAX (A/C, No):
	E-MAIL ADDRESS: gadmin@glipinc.com	
INSURED Polaris Logistics Group Inc. 104 Summit St Ste 400 Toledo OH 43604	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : Lloyd's Syndicate 2623 Beazley	48946
	INSURER B : Lloyds of London	15792
	INSURER C : Liberty Mutual	23043
	INSURER D :	
	INSURER E :	
	INSURER F :	
POLALOG-01		

COVERAGES

CERTIFICATE NUMBER: 1456456654

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.

EXCLUSIONS AND CONDITIONS OF COVER SELECTED LIMITS OWNED MAY HAVE BEEN REDUCED BY TRAD DEFINITIONS															
INSR LTR	TYPE OF INSURANCE		ADDL/SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS								
A	COMMERCIAL GENERAL LIABILITY			W8458425PNVE	5/23/2025	5/23/2026	EACH OCCURRENCE		\$ 1,000,000						
	CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)		\$ 1,000,000						
							MED EXP (Any one person)		\$ 10,000						
							PERSONAL & ADV INJURY		\$ 1,000,000						
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE		\$ 2,000,000						
	X POLICY <input type="checkbox"/> PRO- JECT <input checked="" type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG		\$ 1,000,000						
	OTHER:								\$						
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)		\$						
	ANY AUTO						BODILY INJURY (Per person)		\$						
	OWNED AUTOS ONLY						BODILY INJURY (Per accident)		\$						
A	HIRED AUTOS ONLY						PROPERTY DAMAGE (Per accident)		\$						
							Contingent Auto Liab		\$ \$ 1,000,000						
	Contingent AL														
	UMBRELLA LIAB		<input checked="" type="checkbox"/>	OCCUR		5/23/2025	5/23/2026	EACH OCCURRENCE							
	EXCESS LIAB		<input type="checkbox"/>	CLAIMS-MADE				AGGREGATE							
B			<input type="checkbox"/>	DED				Excess Auto Liability							
			<input type="checkbox"/>	RETENTION \$				\$ \$ 5,000,000							
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		<input checked="" type="checkbox"/>	Y / N											
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below				N / A		3/3/2025	3/3/2026	<input checked="" type="checkbox"/>	PER STATUTE	OTH-ER					
								E.L. EACH ACCIDENT		\$ 1,000,000					
								E.L. DISEASE - EA EMPLOYEE		\$ 1,000,000					
								E.L. DISEASE - POLICY LIMIT		\$ 1,000,000					
B	Excess General Liability					5/23/2025	5/23/2026	Excess General Liab.		\$ 1,000,000					
A	Contingent Cargo							Deductible \$5,000		\$ 2,500					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Reefer Breakdown is applicable on the above listed policy.

CERTIFICATE HOLDER

CANCELLATION

Informational Purposes

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

Acting