

CERTIFICATE OF INSURANCE

- THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY -

CERTIFICATE HOLDER COPY

NAME AND NUMBER OF AGENCY WALKER POOLE INSURANCE INC 18310 MONT VLG AVE STE 360

BB1051

11/27/2022

GAITHERSBURG , MD 20879-0000

301-258-2602

NAME AND ADDRESS OF CERTIFICATE HOLDER

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NAME AND ADDRESS OF NAMED INSURED

DR JENNIE SANDERS 202 QUEEN MARIE CT UPPER MARLBORO MD 20774-8818 ALL SEASON LANDWORKS 13818 CENTERBURG RD SUNBURY OH 43074-

This is to certify that policies, as indicated by Policy Number below, are in force for the Named Insured at the time that the certificate is being issued.

DATE ISSUED

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMITS OF INSURANCE		
ENERAL LIABILITY OMMERCIAL GENERAL LIABILITY	Q250102267	01/01/2023	01/01/2024	EACH OCCURRENCE	\$ 1000000	STEERSTEERSEERSEERSEERSEERS
OCCURRENCE FORM GEN'L AGGREGATE LIMIT APPLIES PER: POLICY				FIRE DAMAGE (Any one premises)	\$ 1000000	
				MED EXP (Any one person	\$ 5000	
				PERSONAL & ADV INJURY	s 1000000	
				GENERAL AGGREGATE	\$ 2000000	
				PRODUCTS-COMP/OP AGO	\$ 2000000	
				BODILY INJURY (EACH PERSON) BODILY INJURY (EACH ACCIDENT)	s	
8				PROPERTY DAMAGE	\$	1
· ·				BODILY INJURY AND PROPERTY DAMAGE COMBINED	s	
				EACH OCCURRENCE		
				AGGREGATE	-	
				STATUTORY		
				BODILY ACCIDENT INJURY DISEASE	S	EACH ACCIDENT POLICY LIMIT
				BY DISEASE	\$	EACH EMPLOYE

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

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.

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).

THIS CERTIFICATE IS ISSUED FOR INFORMATION PURPOSES ONLY AND CONFERS NO RIGHTS ON THE CERTIFICATE HOLDER. IT DOES NOT AFFIRMATIVELY OR NEGATIVELY LIST, AMEND, EXTEND OR OTHERWISE ALTER THE TERMS, EXCLUSIONS AND CONDITIONS OF INSURANCE COVERAGE CONTAINED IN THE POLICY(IES) INDICATED ABOVE. THE TERMS AND CONDITIONS OF THE POLICY(IES) GOVERN THE INSURANCE COVERAGE AS APPLIED TO ANY GIVEN SITUATION. LIMITS SHOWN MAY HAVE BEEN REDUCED BY CLAIMS PAID. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER AND CERTIFICATE HOLDER.

ERIE INSURANCE

SEE REVERSE SIDE

AUTHORIZED REPRESENTATIVE Para Cipiani