

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/18/2023

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 SUBROGATIONIS 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).

ALITOMATIC DATA DDOCESCING INC ACCV				CONTACT NAME:	CONTACT NAME:				
AUTOMATIC DATA PROCESSING INS AGCY 76250875) 524-7024		FAX (A/C, No):		
1 ADP BLVD M/S 625				(A/C, No, Ext):	(A/C, No, Ext): (A/C, NO). E-MAIL ADDRESS:				
ROSELAND NJ 07068				INSURER(S) AFFORDING COVERAGE NAIC#					
				INSURER A: Hartford Casualty Insurance Company				29424	
INSURED					INSURER B:				
CYCLONE AIR SYSTEMS INC									
1070 CONCORD AVE SUITE 285				INSURER C:					
CONCORD CA 94520				INSURER D:					
				INSURER E :					
				INSURER F:					
			IUMBER:						
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/Y YYY)	LIMI	rs	
	COMMERCIAL GENERAL LIABILITY				(,	(, 22, 1111,	EACH OCCURRENCE		
	CLAIMS-MADE OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)		
							MED EXP (Any one person)		
		1					PERSONAL & ADV INJURY		
	GEN'L AGGREGATE LIMIT APPLIES PER:	1					GENERAL AGGREGATE		
	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AG	G	
	OTHER:								
AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)		
	ANY AUTO						BODILY INJURY (Per person)	
	ALL OWNED SCHEDULED AUTOS AUTOS						BODILY INJURY (Per accider	nt)	
	HIRED NON-OWNED						PROPERTY DAMAGE		
	AUTOS AUTOS						(Per accident)		
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE		
	EXCESS LIAB CLAIMS-						AGGREGATE		
	DED RETENTION \$	-							
	WORKERS COMPENSATION						✓ PER OT	H-	
	AND EMPLOYERS' LIABILITY						X STATUTE ER		
	ANY Y/N PROPRIETOR/PARTNER/EXECUTIVE			76 WEG AK7EVG	03/02/2023	03/02/2024	E.L. EACH ACCIDENT	\$1,000,000	
Α	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A		70 WLG AR7LVG	03/02/2023	03/02/2024	E.L. DISEASE -EA EMPLOYE	\$1,000,000	
	If yes, describe under						E.L. DISEASE - POLICY LIMI	т \$1,000,000	
	DESCRIPTION OF OPERATIONS below								
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)									
Those usual to the Insured's Operations.									
CERTIFICATE HOLDER CANCELLATION								DE CANCELLES	
l	INFORMATION PURPOSE ONLY CONCORD AVE STE 285				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED				
CONCORD CA 94520-5696					IN ACCORDANCE WITH THE POLICY PROVISIONS.				
					AUTHORIZED REPRESENTATIVE				
					Sugan S. Castaneda				