

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/28/2022

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 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

th	is certificate does not confer rights to	the o	certifi	cate holder in lieu of such								
PRO	DUCER				CONTAC NAME:	Jaille Fai	utler					
The Branna Agency						(A/C, NO, EXT): (A/C, NO).					654-0242	
1376 US Highway 22						E-MAIL address: jaime@brannaagency.com						
PO Box 1170						INSURER(S) AFFORDING COVERAGE					NAIC#	
Mountainside NJ 07092					INSURER A: Selective Fire & Casualty Insurance Company						14377	
INSURED						INSURER B:						
TOTAL HOME SERVICES LLC D/B/A TOTAL HOME CLEANING						INSURER C:						
31 CHATHAM RD						INSURER D:						
					INSURER E :							
SUMMIT NJ 07901-1312					INSURER F:							
COVERAGES CERTIFICATE NUMBER:				NUMBER: 22-23	REVISION NUMBER:							
TI	IIS IS TO CERTIFY THAT THE POLICIES OF	INSUF	RANCE	LISTED BELOW HAVE BEEN	ISSUED	TO THE INSU	RED NAMED A	BOVE FOR THE PO	OLICY PERIC	)D		
	DICATED. NOTWITHSTANDING ANY REQU		,							IS		
	ERTIFICATE MAY BE ISSUED OR MAY PERT (CLUSIONS AND CONDITIONS OF SUCH PO							UBJECT TO ALL TE	TE LEKIVIS,			
INSR LTR TYPE OF INSURANCE			ADDL SUBR INSD WVD POLICY NUMBER			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS				
LIK	COMMERCIAL GENERAL LIABILITY		WVD	TOLIOT NOMBLIX		(MINI/DD/1111)	(MINI/DD/1111)				00,000	
	CLAIMS-MADE OCCUR							DAMAGE TO RENTE	D	500	,000	
	CLAIMS-MADE CCCUR							PREIMISES (EA OCCUITETICE) \$		15.0	000	
Α			S 2384115			09/27/2022	09/27/2023	MED EXI (Ally one person)		1.00	00,000	
	CENTI ACCRECATE LIMIT ADDITES DED.							FERSONAL & ADV INJURT		00,000		
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- JECT LOC								, ,	2.00	00,000	
								PRODUCTS - COMP	FOF AGG   \$	, .		
	OTHER: AUTOMOBILE LIABILITY							COMBINED SINGLE (Ea accident)	LIMIT	1,00	0.000	
Α	X ANY AUTO					09/27/2022	09/27/2023	BODILY INJURY (Pe				
	OWNED AUTOS ONLY AUTOS NON-OWNED			S 2384115				BODILY INJURY (Pe	· · ·			
								PROPERTY DAMAG (Per accident)				
	AUTOS ONLY AUTOS ONLY							(Per accident) Uninsured motor				
	UMBRELLA LIAB OCCUB							EACH OCCURRENCE				
	EVOCES LIAB OCCUR											
	CLAIMS-IMADE	-						AGGREGATE	\$			
	DED RETENTION \$ WORKERS COMPENSATION							PER STATUTE	OTH- ER	5		
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under												
								E.L. EACH ACCIDENT \$				
								E.L. DISEASE - EA EMPLOYEE \$				
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POL	ICY LIMIT \$	5		
DES	 CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A(	OPD 1	01 Additional Pemarks Schedule	may he a	ttached if more si	nace is required)					
	certificate holder is listed as Additional Insi	•		,	•		paso io required)					
1110	certificate floraer is listed as reactional first	110001	11 4000	ordance with the policy terms	and con	iditions.						
CEI	RTIFICATE HOLDER		CANC	CANCELLATION								
Coastar, Inc. Attn: Mary Huettenmoser						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
31 Chatham Road						AUTHORIZED REPRESENTATIVE						
Rear Building Summit N.I. 07901						CR -						
	Summit	I			_ 14							