

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/25/2022

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.

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 Commercial Lines CSP						
Walter P Geoghan Agency, Inc						PHONE (621) 472 5000 FAX (621) 472 5611						
870 Montauk Highway						(A/C, No, Ext): (631) 472-3000 (A/C, No): (631) 472-3011  E-MAÎL ADDRESS:						
						INSURER(S) AFFORDING COVERAGE						
Bayport NY 11705						INSURER A: Lloyd's Of London					AA-112898	
INSURED						INSURER B:						
Target Recovery, Inc					INSURER C:							
P.O. Box 164809				INSURER D:								
Miami FL 33				FL 33116	INSURER E : INSURER F :							
COVERAGES CERT			ATF	NUMBER: 22 23	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.  INSIR   INDICIONAL POLICY FEF   POLICY EXP												
LTR	TYPE OF INSURANCE		WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)		LIMIT			
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE DAMAGE TO RENTE	ΞD	100	0,000	
	CLAIMS-MADE OCCUR  Includes Wrongful							PREMISES (Ea occurrence) \$ 100,  MED EXP (Any one person) \$ 5,00				
Α	Repossession			TRAAC-723-00746G-22		03/25/2022	03/25/2023	PERSONAL & ADV I	,	Ψ	0,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREG	2,000			
	POLICY PRO- JECT LOC							PRODUCTS - COMP		\$ 1,00	0,000	
	OTHER:									\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE (Ea accident)		\$		
	ANY AUTO OWNED SCHEDULED						//		DDILY INJURY (Per person) \$			
Α	AUTOS ONLY AUTOS HIRED NON-OWNED			TRAAC-723-00746G-22		03/25/0222	03/25/2023	BODILY INJURY (Pe		\$		
	AUTOS ONLY  Repossesse  Vehicles Only							(Per accident)  Drive Away PD	, <u> </u>	\$ \$ 100,	000	
	UMBRELLA LIAB OCCUR							EACH OCCURRENC	`=	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	) <u> </u>	\$		
	DED RETENTION \$									\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER			
	IY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDEN	NT	\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE \$		\$		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POL	ICY LIMIT	\$		
	Garage Keepers Direct Primary			TD 4 4 0 700 007400 00		00/05/0000	00/05/0000	Limit: \$350,000				
А	On Hook			TRAAC-723-00746G-22		03/25/2022	03/25/2023	Limit: \$100,000				
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICLE	S (AC	OPD 1	01 Additional Romarks Schodulo	may bo at	ttached if more en	aco is roquirod)	Ded: \$1,000.				
	tificate Holder as Additional Insured	:5 (AC	יני מאט,	JT, Additional Remarks Schedule,	may be a	ttached if more sp	ace is required)					
Storage Location: 10736 SW. 188th Street Miami, FL 33157												
CEF	RTIFICATE HOLDER	CANCELLATION										
"PROOF OF INSURANCE"						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						
						John P. Geoghan						