

**CBRENNAN** 



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/31/2020

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.

	SUBROGATION IS WAIVED, subjection is certificate does not confer rights to										
PRODUCER Acrisure, LLC D/B/A Chadler Solutions 100 Passaic Ave, Suite 120 Fairfield, NJ 07004-3508						CONTACT NAME:					
						PHONE (A/C, No, Ext): (973) 227-0025 FAX (A/C, No): (973) 227-4026					
						E-MAIL ADDRESS:					
						INS	URER(S) AFFOI	RDING COVERAGE		NAIC #	
						INSURER A: Hartford Fire Insurance Company				19682	
INSURED						RB:					
EMSL Analytical, Inc. 200 Route 130 North Cinnaminson, NJ 08077						INSURER C:					
						RD:					
						RE:					
						INSURER F:					
				NUMBER:				REVISION NUMBER:			
IN C	HIS IS TO CERTIFY THAT THE POLICII IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	EQUI PER POLI	REMI TAIN, CIES.	ENT, TERM OR CONDITION THE INSURANCE AFFOR LIMITS SHOWN MAY HAVE	N OF A	NY CONTRAC THE POLICI REDUCED BY I	CT OR OTHER IES DESCRIB PAID CLAIMS POLICY EXP	R DOCUMENT WITH RESPE ED HEREIN IS SUBJECT T	CT T	O WHICH THIS	
A A	TYPE OF INSURANCE  X COMMERCIAL GENERAL LIABILITY	INSD	SUBR WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT		1.000.000	
ζ .	CLAIMS-MADE X OCCUR	x		42111IN IV/4477		4/2/2020	4/2/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- POLICY X DECT LOC			13UUNJV4477		4/2/2020	4/2/2021		\$	10,000	
								MED EXP (Any one person)	\$	1,000,000	
								PERSONAL & ADV INJURY	\$	2,000,000	
								GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$	2,000,000	
	OTHER:							TRODUCTO - COMIT/OF ACC	\$		
Α	AUTOMOBILE LIABILITY			13UUNJV4477		4/2/2020		COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
	X ANY AUTO						4/2/2021	BODILY INJURY (Per person)	\$		
	OWNED AUTOS ONLY SCHEDULED AUTOS  X HIRED X NON-OWNED AUTOS ONLY X NON-OWNED AUTOS ONLY							BODILY INJURY (Per accident)	\$		
								PROPERTY DAMAGE (Per accident)	\$		
								\$			
Α	X UMBRELLA LIAB X OCCUR							EACH OCCURRENCE	\$	5,000,000	
	EXCESS LIAB CLAIMS-MADE			13RHUJY3961		4/2/2020	4/2/2021	AGGREGATE	\$	5,000,000	
_	DED X RETENTION\$ 10,000							DED OTH	\$		
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N	N/A	1	13WEBQ6138		4/2/2020	4/2/2021	PER OTH- STATUTE ER		4 000 000	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)  If yes, describe under							E.L. EACH ACCIDENT	\$	1,000,000	
								E.L. DISEASE - EA EMPLOYEE	\$	1,000,000 1,000,000	
	DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	ACORE	101. Additional Remarks Schedu	ile. mav b	e attached if mor	e space is requi	red)			
520	on non or or enament, resourcing, verile		100112	7 To 1, Additional Remarks Concac	iic, may b	e attaoned if mor	c opace is requi	ou,			
CERTIFICATE HOLDER						CANCELLATION					
					SHO		THE AROVE D	ESCRIBED POLICIES RE C	۵NCE	I I ED REEORE	
						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN					
					ACC	ORDANCE WI	TH THE POLIC	CY PROVISIONS.			
					ALITHO	RIZED REPRESE	NTATIVE				
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