CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/6/2020

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. 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
Brady, Chapman, Holland & Associates, Inc.
10055 West Gulf Bank
Houston TX 77040

CONTACT NAME:
PHONE (A/C, No, Ext): 713-688-1500 **FAX (A/C, No):** 713-688-7967
E-MAIL ADDRESS: ecerts@bch-insurance.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Westchester Fire Ins. Co (AWB)	10172
INSURER B : West American Ins (Liberty Mutual)	44393
INSURER C : Texas Mutual Insurance Co	22945
INSURER D : Peleus Insurance Co. (AmWINS)	11035
INSURER E :	
INSURER F :	

INSURED JAMESWTURN
James W. Turner Construction, Ltd.
J W Turner Construction, Inc
14215 Mary Jane
Tomball TX 77377

COVERAGES **CERTIFICATE NUMBER:** 1306600182 **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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
D	X COMMERCIAL GENERAL LIABILITY			164GL017810200	7/1/2020	7/1/2021	EACH OCCURRENCE	$ 1,000,000
	[ ] CLAIMS-MADE [X] OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
	X 10,000						MED EXP (Any one person)	$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	$ 1,000,000
	[ ] POLICY [X] PRO-JECT [ ] LOC						GENERAL AGGREGATE	$ 2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG	$ 2,000,000
								$
B	AUTOMOBILE LIABILITY			BAW2160787208	1/8/2020	1/8/2021	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	[ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	[ ] HIRED AUTOS ONLY [ ] NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
D	[ ] UMBRELLA LIAB [X] OCCUR			AUX424048703	7/1/2020	7/1/2021	EACH OCCURRENCE	$ 2,000,000
	X EXCESS LIAB [ ] CLAIMS-MADE						AGGREGATE	$ 2,000,000
	[ ] DED [X] RETENTION $ $0							$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			0001156662	4/28/2020	1/15/2021	X PER STATUTE [ ] OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [ ] N/A						E.L. EACH ACCIDENT	$ 1,000,000
	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
A	Builders Risk			I1169107001	1/1/2020	1/1/2021	Per Location Per Occurrence Deductible	$2,000,000 $5,000,000 $1,000*

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
*Builders Risk Named Storm Deductible is $50,000 or 2%.
The policy includes Blanket additional insured on the general liability per forms CG2010 0413 and CG2037 0413, automobile per form AC8501 0618, with a waiver of subrogation on the general liability per form U047 0310, automobile per form AC8501 0618 and workers compensation per form WC420304B when required by written contract. The insurance is primary and non-contributory as respects general liability per form CG2001 0413 and automobile per form AC8501 0618.

CERTIFICATE HOLDER
Lower Rio Grande Valley Development Council
Dept of Regional Planning 301 W Railroad St
Weslaco TX 78596

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.

AUTHORIZED REPRESENTATIVE
Jeff Brady

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