

ADDITIONAL REMARKS SCHEDULE

AGENCY Sheaner Insurance, LP		NAMED INSURED SOL Shading Solutions, LLC	
POLICY NUMBER 46 SBA IU2838 SC / 46 UEC AP7817 SC / SBP-0001281745		2168 Diplomat Drive	
CARRIER Sentinel Ins Co / The Hartford / Texas Mutual	NAIC CODE	Farmers Branch, Texas 75234	
		EFFECTIVE DATE: 01/21/2017	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: Certificate of Insurance

ADDITIONAL INSURED, with regards to General Liability and Business Automobile;
Other Person(s) or Organization(s) are named as Additional Insured with respects to General Liability and Business Automobile Liability if; required by written contract, written agreement or permit, for the the period of time required by the contract, agreement or permit; while in the performance of the insured's on-going operations for the certificate holder or in connection with "your work" performed for the certificate holder and included within the Products & Completed Operations hazard. (SS0008, 4/05)

WAIVER OF SUBROGATION, with regards to General Liability and Business Automobile;
Other Person(s) or Organization(s) are granted Waiver of Subrogation with respects to General Liability and Business Automobile Liability if; the insured has waived any rights of recovery against any person or organization for all or any part of any payment, including Supplemental Payments, we have made under this coverage part, we also waive that right provided the insured waived their rights of recovery against such person or organization in a contract, agreement or permit that was executed prior to the injury or damage. (SS0008, 4/05)

This insurance will be Primary & Non-Contributory with respects to General Liability and Business Automobile Liability if; the insured has agreed in a written contract, written agreement or permit that this insurance is primary and non-contributory with the certificate holder's own insurance, this insurance is primary and we won't seek contribution from that other insurance (SS0008, 4/05)

Certificate Holder will be given 30 days notice of cancellation; except 10 days for non-payment of premium on General Liability policy, (SS1224-06/11) and Business Auto policy, (IH0307, 06/11)

General Liability Aggregate Limits apply on a per project basis (SS0433, 04/05)

WAIVER OF SUBROGATION, with regards to Workers Compensation;
Schedule; Any person or organization for whom the Named Insured has agreed by written contract to furnish this waiver. We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule, but this waiver applies only with respect to bodily injury arising out of the operations described in the Schedule where you are required by a written contract to obtain this waiver from us. (WC420304B)

Workers Compensation policy covers Texas employees as defined under the Texas Labor Code.