

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/22/2011

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 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 Trissel Graham & Toole, Inc. 220 Emerson Place Davenport, IA 52801	CONTACT NAME: Deanna Schwab PHONE (A/C, No, Ext): 563.322.3521 FAX (A/C, No): 563.322.1046 E-MAIL ADDRESS: PRODUCER CUSTOMER ID#:
	INSURER(S) AFFORDING COVERAGE INSURER A: Nationwide Insurance Company INSURER B: BancInsure INSURER C:
INSURED A Handy Service Company 1632 S. West Street Suite 1 Wichita, KS 67213	NAIC #

Our legal name is:
A Handy Service Co
We do business as:
Handyman Matters of Wichita

COVERAGES **CERTIFICATE NUMBER**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE INDICATED. NOTWITHSTANDING ANY REQUIREMENT, THE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURER(S) SHALL NOT BE RESPONSIBLE FOR THE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS ARE SUBJECT TO ALL THE TERMS, CONDITIONS AND COVERAGE OF SUCH POLICIES.


REVISION NUMBER:

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENTL. AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC		ACP7123845186	03/25/2011	03/25/2012	EACH OCCURRENCE	\$ 1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		ACP7123845186	03/25/2011	03/25/2012	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
						BODILY INJURY (Per person)	\$
A	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 0		ACP7123845186	03/25/2011	03/25/2012	EACH OCCURRENCE	\$ 1,000,000
						AGGREGATE	\$ 1,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	WC200-0001089-2011A	03/25/2011	03/25/2012	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	OTHER
		N/A				E.L. EACH ACCIDENT	\$ 500,000
						E.L. DISEASE - EA EMPLOYEE	\$ 500,000
						E.L. DISEASE - POLICY LIMIT	\$ 500,000

This shows our Liability Insurance, both General, Automobile, and Umbrella.

This shows our Workers Compensation Insurance.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 re: Operations by the Named Insured

CERTIFICATE HOLDER To Whom It May Concern	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  Tracy Jones/DLS

CITY OF WICHITA LICENSE

License No: 6344

Certificate No:
BUS2005-06344

Issued Date:
1/1/2012

Renewal Date:
2/1/2011

License Expires:
12/31/2012

Qualified Person: PHILIP C DAVIS

License Category: CLASSB

IVRS #: 5756

Our legal name is: A Handy Service Co
We do business as:
Handyman Matters of Wichita

Business Name: A HANDY SERVICE CO
1632 S WEST SUITE #1

Phone: phil@handymanmatters.com
(316)773-0303

WICHITA

KS 67213

Fee Description	Amount Due	Amount Paid	Receipt #
Class B License	\$200.00	\$200.00	1000000000008
Totals:	\$200.00	\$200.00	



CITY OF
WICHITA

Wichita City Code

Section 18.12.070 Class B building license.

Contractor's license, class B building, shall entitle the holder thereof to contract for and to perform any act as a contractor, as defined in Section 18.12.010, limited to the erection, addition to, remodeling and wrecking of commercial buildings and single or multiple dwelling residential buildings, not exceeding three stories in height, and nonstructural remodels to commercial buildings exceeding three stories in height. The annual license fee shall be two hundred dollars. (Ord. No. 43-5 64 § 2) <http://wichita.gov/CityCode/Default.htm?code=2959>

A Handy Service Co