

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/24/2020

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).

	is certificate does not confer rights to							equire an endorsement	. A SI	atement on	
	DUCER				CONTACT NAME:						
	RSH USA INC.				PHONE FAX (A/C, No, Ext): (A/C, No):						
CHI	W. MADISON CAGO, IL 60661				E-MAIL ADDRES	SS:		(A/O, NO).			
Attn	: Chicago.certrequest@marsh.com				INSURER(S) AFFORDING COVERAGE NAIC #					NAIC#	
CN'	01631305-ATI-Tarif-20-21				INSURER A: Travelers Property Casualty Company Of America					25674	
INSURED						INSURER B:					
American Transport Inc., American Wind Transport Group, LLC,						INSURER C:					
ATI Trucking, LLC						INSURER D:					
100 Industry Drive Pittsburgh, PA 15275						INSURER E:					
					INSURE	RF:					
СО	VERAGES CER	TIFIC	CATE	E NUMBER:	CHI-	009458130-00		REVISION NUMBER: 0			
IN C	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RESERVED OR MAY BE ISSUED OR MAY INCOME.	QUIF PERT	REMEI	NT, TERM OR CONDITION THE INSURANCE AFFORDI	OF ANY	CONTRACT	OR OTHER DESCRIBED	OCUMENT WITH RESPEC	OT TO	WHICH THIS	
INSR	XCLUSIONS AND CONDITIONS OF SUCH	ADDL	SUBR	I	DEEN K	POLICY EFF	POLICY EXP	LIMIT			
LTR	TYPE OF INSURANCE COMMERCIAL GENERAL LIABILITY	INSD	WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS			
								DAMAGE TO RENTED	\$		
	CLAIMS-MADE OCCUR							PREMISES (Ea occurrence)	\$		
								MED EXP (Any one person)	\$		
	CENTI ACCRECATE LIMIT APPLIES PER							PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$			
	POLICY PRO- JECT LOC										
	OTHER:							PRODUCTS - COMP/OP AGG	\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO							BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS ONLY AUTOS							BODILY INJURY (Per accident)	\$		
	AUTOS ONLY AUTOS HIRED NON-OWNED AUTOS ONLY AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	AUTOS ONLY AUTOS ONLY							(Fer accident)	\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$								\$		
	WORKERS COMPENSATION							PER OTH- STATUTE ER			
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE	N / A						E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED? N (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYEE	\$		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
Α	Cargo			QT-660-3K989639-TIL-20		03/01/2020	03/01/2021	Any one vehicle/ catastrophe		100,000	
								Deductible		5,000	
										.,	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI	LES (A	ACORD	101, Additional Remarks Schedul	le, may be	attached if more	e space is require	ed)			
CF	RTIFICATE HOLDER				CANO	ELLATION					
SAMPLE SAMPLE SAMPLE, PA 00000						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 of Marsh USA Inc.					
	1			1	Manas	Manashi Mukherjee Manashi Mukherjee				ee	

AGENCY CUSTOMER ID: CN101631305

LOC #: Chicago



ADDITIONAL REMARKS SCHEDULE

Page _ 2 _ of _ 2

AGENCY		NAMED INSURED American Transport Inc., American Wind Transport Group, LLC, ATI Trucking, LLC			
MARSH USA INC.					
POLICY NUMBER					
		100 Industry Drive			
CARRIER NAIC (Pittsburgh,PA 15275			
		EFFECTIVE DATE:			
ADDITIONAL REMARKS					

CARRIER				NAIC CODE					
					EFFECTIVE DATE:				
ADDITIONAL REMARKS									
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,									
FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance									
FORWINOWIBER		PORIVITILE.	. Octanicate of Li	idollity Iriodia	noo				
Tariff rules and regulations limit carrier's liability to a max of \$1.50/lb for each article transported, or \$0.10/lb for shipments of used or reconditioned									
goods. If value in excess of these limits is declared, see tariff rules and regulations for complete procedures to which shipper is subject. It is agreed that									
	the carrier's liability on any shipments tendered by certificate holder is limited to an amount not to exceed the limit listed above. Higher limits are								
		upon confirmation	in writing from the corporate	e headquarters of th	ne motor carrier. Drivers or agents have no authority				
to amend wording or limits.									