

# CERTIFICATE OF INSURANCE

Scan Code  
**CERT**

FARM BUREAU MUTUAL INSURANCE COMPANY OF MICHIGAN  
 FARM BUREAU GENERAL INSURANCE COMPANY OF MICHIGAN  
 Lansing, Michigan 48909

**AMENDED**

Name and Address of Certificate Holder:

Named Insured and Address:

**Jared Baxter**  
**JB Landscape Services, Inc**  
**Get-R-Cut.com**  
**15035 CLEVELAND**  
**SPRING LAKE, MI 49456**

Issue Date: **07/10/2020**

This is to certify that the following policy(ies) of insurance has (have) been or will be issued by the Company to the Named Insured. This certificate is not a guarantee that the policy(ies) will remain in effect until its (their) stated expiration date. In the event of cancellation of any of the insurance policies before the expiration date, the Company will endeavor to mail notice of such cancellation to the Certificate Holder designated above at their last known address, but failure to mail such notice shall impose no obligation or liability of any kind upon the Company. This certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This certificate does not amend, extend, or alter the coverage afforded by the policy(ies) of insurance indicated below. The information conveyed in this Certificate of Insurance is only valid for the indicated policy periods. Certificates of Insurance for subsequent policy periods must be requested by the Certificate Holder.

Type of Insurance	Policy Number	Policy Period	Limits of Liability
Business Auto Liability • Specifically Described Autos (Symbol 7)  <input type="checkbox"/> Hired Auto (Symbol 8) <input type="checkbox"/> Non-Owned Auto (Symbol 9)	<b>BAP-2765495</b>	Eff. <b>05/14/2020</b> Exp. <b>05/14/2021</b>	Combined Single Limit Each Accident \$ <b>1,000,000</b>
Worker's Disability Compensation		Eff. Exp.	Coverage A - Statutory Coverage B - Bodily Injury by Accident \$ Each Accident (Employer's Liab.) Bodily Injury by Disease \$ Each Employee Bodily Injury by Disease \$ Policy Limit
Comprehensive General Liability or Commercial Package <input checked="" type="checkbox"/> Including <input type="checkbox"/> Excluding Products-Completed Operations <input type="checkbox"/> Hired Auto <input type="checkbox"/> Non-Owned Auto <input type="checkbox"/> CERTIFICATE HOLDER is an Additional Insured on the Comprehensive General Liability Policy. <input type="checkbox"/> Excluding:	<b>CPP-2765496</b>	Eff. <b>05/14/2020</b> Exp. <b>05/14/2021</b>	Each Occurrence \$ <b>1,000,000</b> Products Aggregate \$ <b>2,000,000</b> General Aggregate \$ <b>2,000,000</b>  Medical Payments Limit \$ <b>5,000</b>
Owners' or Contractors' Protective Liability		Eff. Exp.	Each Occurrence \$ General Aggregate \$
Products - Completed Operations Liability		Eff. Exp.	Each Occurrence \$ Products Aggregate \$
Umbrella Liability	<b>U-2765496</b>	Eff. <b>06/01/2019</b> Exp. <b>06/01/2020</b>	Limit \$ <b>5,000,000</b>
Farmowners Liability Including Products  Business Pursuits <input type="checkbox"/> Excluded <input type="checkbox"/> Included		Eff. Exp.	Limit \$ Type: Describe:
Other		Eff. Exp.	

X \_\_\_\_\_  
 Authorized Signature

**4099**  
 Agent No.

**(231) 733-7987**  
 Agent Phone Number