



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/03/2024

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 EMBROKER INSURANCE SERVICES LLC 57556913 5214F DIAMOND HGHTS BLVD 1261 SAN FRANCISCO CA 94131	CONTACT NAME:	
	PHONE (844) 436-2765 (A/C, No, Ext):	FAX (A/C, No):
E-MAIL ADDRESS:		
INSURER(S) AFFORDING COVERAGE		NAIC#
INSURER A : Hartford Underwriters Insurance Company		30104
INSURER B : Hartford Casualty Insurance Company		29424
INSURER C :		
INSURER D :		
INSURER E :		
INSURER F :		

COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:
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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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/Y YYY)	LIMITS	
A	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> General Liability			57 SBA BC1W7J	06/26/2024	06/26/2025	EACH OCCURRENCE	\$1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000
							MED EXP (Any one person)	\$10,000
							PERSONAL & ADV INJURY	\$1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:							GENERAL AGGREGATE	\$2,000,000
							PRODUCTS - COMP/OP AGG	\$2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			57 SBA BC1W7J	06/26/2024	06/26/2025	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
							BODILY INJURY (Per person)	
							BODILY INJURY (Per accident)	
							PROPERTY DAMAGE (Per accident)	
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE	
							AGGREGATE	
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			57 WEC BB3JZC	11/01/2023	11/01/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	\$1,000,000
							E.L. DISEASE -EA EMPLOYEE	\$1,000,000
							E.L. DISEASE - POLICY LIMIT	\$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Those usual to the Insured's Operations.

CERTIFICATE HOLDER For Informational Purposes 29034 WESTBOURNE CT HAYWARD CA 94544-6345	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 <i>Susan L. Castaneda</i>
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THE HARTFORD
BUSINESS SERVICE CENTER
3600 WISEMAN BLVD
SAN ANTONIO TX 78251

July 3, 2024

SEQUOIA WIRELESS, LLC
29034 WESTBOURNE CT
HAYWARD CA 94544-6345

Account Information:

Policy Holder Details :	Sequoia Wireless, LLC
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Contact Us

Need Help?

Chat online or call us at
(866) 467-8730.

We're here Monday - Friday.

Enclosed please find a Summary Of Insurance for the above referenced Policyholder. Please contact us if you have any questions or concerns.

Sincerely,

Your Hartford Service Team



July 3, 2024

Account Policy Information:

Agency Name	EMBROKER INSURANCE SERVICES LLC
Agency Code	57556913

Recipient Information

SEQUOIA WIRELESS, LLC
29034 WESTBOURNE CT
HAYWARD CA 94544-6345

SUMMARY OF INSURANCE

Account Policy Recap	Policy Number	Policy Term	Premium
Next Gen Spectrum Hartford Underwriters Insurance Company	57 SBA BC1W7J	06/26/2024 to 06/26/2025	\$798

Sum of Insurance

Summary of Insurance (Continued)

Next Gen Spectrum Summary of Insurance
with
Hartford Underwriters Insurance Company
A member company of The Hartford
06/26/2024 - 06/26/2025

PREMIUM SUMMARY

COVERAGE	PRICE
Business Owner's Policy	\$798

LOCATION(S)

LOCATION	DESCRIPTION	TYPE AND AREA	VALUATION <small>How we calculate the value of your property</small>
LOC 1; BLDG 1	29034 WESTBOURNE CT, HAYWARD,CA 94544-6345	Frame	Business Personal Property: Replacement Cost

POLICY SUMMARY

PROPERTY LIMITS

Deductible: \$500	Windstorm or Hail Percentage Deductible	Building	Business Personal Property (BPP)
LOC 1; BLDG 1	NA	N/A	N/A

BUSINESS LIABILITY (Also known as General Liability)

EACH OCCURRENCE LIMIT	\$1,000,000
GENERAL AGGREGATE LIMIT	\$2,000,000
PRODUCTS/COMPLETED OPERATIONS AGGREGATE	\$2,000,000

Summary of Insurance (Continued)

CUSTOMIZED COVERAGES FOR YOUR BUSINESS

<u>BUSINESS LIABILITY COVERAGE ADDED</u>	
COVERAGE	LIMIT
Additional Insured - Designated Person or Organization	Included
Blanket Additional Insured by Contract	Included ¹
Hired Auto and Non-Owned Auto	Included ¹
Technology Services Coverage Extension	Included ¹

¹ Included in Business Liability Limit(s)

PROPERTY COVERAGES DETAIL

PROPERTY COVERAGES	TOTAL LIMIT OF INSURANCE
Accounts Receivable	\$25,000
Arson and Theft Reward	\$10,000
Business Income and Extra Expense	
Extended Business Income	45 days
Limit	\$225,000
Limit Type	Specified Limit
Period of Restoration	12 months
Waiting Period	None
Business Income from Civil Authority Actions	
Duration of Coverage	30 days
Waiting Period	None
Business Income from Dependent Properties	
Limit	\$5,000
Period of Restoration	12 months
Waiting Period	None
Collapse	Included ²
Debris Removal	25% of amount paid for covered loss
Additional Limit	\$15,000
Electronic Data	
Policy Year Limit	\$10,000
Equipment Breakdown	Included ²
Deductible	Property Deductible
Defense	Included
Expediting Expenses	\$50,000
Hazardous Substances	\$50,000
Supplementary Payments	Included
Fire Department Service Charge	\$25,000
Fire Extinguisher Recharge	Included ²
Forgery Coverage (Including Credit Cards, Currency and Money Orders)	\$5,000
Garages, Storage Buildings, and Other Appurtenant Structures	\$50,000

Sum of Insurance

Summary of Insurance (Continued)

PROPERTY COVERAGES	TOTAL LIMIT OF INSURANCE
Glass Expense	Included ²
Identity Recovery Coverage for Businessowners and Employees	
Deductible	\$250
Limit	\$15,000
Lost Wages and Child and Elder Care Expense	\$250 per day, \$5,000 per policy year
Mental Health Sublimit	\$1,500
Interruption of Computer Operations	
Period of Restoration	12 months
Policy Year Limit	\$10,000
Waiting Period	12 hours
Lease Assessment	\$2,500
Leasehold Improvements	\$25,000
Limited Fungi, Bacteria or Virus Coverage	
Limit	\$50,000
Period of Restoration	30 days
Lock and Key Replacement	\$1,000
Money and Securities Coverage	
Inside the Premises Limit	\$10,000
Outside the Premises Limit	\$5,000
Newly Acquired or Constructed Property	
Newly Acquired or Constructed BI/EE Limit	\$100,000
Newly Acquired or Constructed BPP Limit	\$250,000
Ordinance or Law Coverage	
Increased Cost of Construction & Demolition Costs Limit	\$25,000
Undamaged Part Limit	\$25,000
Outdoor Property	\$10,000
Personal Effects	\$10,000
Pollutants and Contaminants Clean up and Removal	\$15,000
Preservation of Property	45 days
Property Off-Premises	\$5,000
Theft Damage to Building	Included ²
Valuable Papers and Records	\$25,000
Water Damage, Other Liquid, Powder or Molten Material Damage	Included ²

² Included in Covered Property Limit(s) (Building and/or Business Personal Property)

BUSINESS LIABILITY COVERAGES DETAIL

BUSINESS LIABILITY COVERAGES	TOTAL LIMIT OF INSURANCE
Business Liability	
Damage To Premises Rented To You Limit	\$1,000,000
General Aggregate Limit	\$2,000,000
Liability and Medical Expenses Limit	\$1,000,000
Medical Expenses Limit	\$10,000

Sum of Insurance

Summary of Insurance (Continued)

BUSINESS LIABILITY COVERAGES	TOTAL LIMIT OF INSURANCE
Personal and Advertising Injury Limit	\$1,000,000
Products-Completed Operations Aggregate Limit	\$2,000,000
Property Damage Liability Deductible	No Deductible

This Summary and its attachments provides a high level overview of policy coverages and does not include all conditions, limitations or exclusions. Please refer to the actual policy forms for detailed coverages, limits and deductibles.



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July 3, 2024

SEQUOIA WIRELESS, LLC
29034 WESTBOURNE CT
HAYWARD CA 94544-6345

Account Information:

Policy Holder Details :	SEQUOIA WIRELESS, LLC
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Agency Name	EMBROKER INSURANCE SERVICES LLC
Agency Code	57556913

Recipient Information

SEQUOIA WIRELESS, LLC
29034 WESTBOURNE CT
HAYWARD CA 94544-6345

SUMMARY OF INSURANCE

Account Policy Recap	Policy Number	Policy Term	Premium
Worker's Compensation Hartford Casualty Insurance Company	57 WEC BB3JZC	11/01/2023 to 11/01/2024	\$613

Sum of Insurance

Summary of Insurance (Continued)

Worker's Compensation Summary of Insurance
with
Hartford Casualty Insurance Company
A member company of The Hartford
11/01/2023 - 11/01/2024

Policy Detail: Worker's Compensation

Policy States: CA

Location 1 Premises Address:

29034 WESTBOURNE CT
HAYWARD CA 94544

Worker's Compensation Coverages:

Employer's Liability Limits	Limit
Disease - Policy Limit	\$1,000,000
Bodily Injury – Accident	\$1,000,000
Disease - Each Employee	\$1,000,000

Class/Payroll Detail	Class Description	Class Code	Payroll
Location 1 - CA	SALESPERSONS - OUTSIDE	8742	\$50,000

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