



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/08/2024

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 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).

<b>PRODUCER</b> Insurance Consulting Group, LLC 1825 Main Street Suite 102 Weston FL 33326	<b>CONTACT NAME:</b> Diana Rodriguez <b>PHONE (A/C, No, Ext):</b> (305) 347-5651 <b>E-MAIL ADDRESS:</b> Dianar@insurancecg.com	<b>FAX (A/C, No):</b> (844) 593-9453
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> High Tech Engineering, Inc 13284 SW 120th Street Miami FL 33186	<b>INSURER A :</b> The Travelers Indemnity company	
	<b>INSURER B :</b> The Travelers Indemnity company of Connecticut	
	<b>INSURER C :</b> Travelers Property Casualty Co of America	
	<b>INSURER D :</b> Travelers Casualty and surety Company	
	<b>INSURER E :</b> Kinsale Insurance Company	
	<b>INSURER F :</b>	

**COVERAGES****CERTIFICATE NUMBER:** CL242805716**REVISION NUMBER:**

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	Y		X-660-5K331770-IND-24	02/09/2024	02/09/2025	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
							MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							OTHER: \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY	Y		BA-4R124588-24-47-G	02/09/2024	02/09/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> OWNED AUTOS ONLY						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
	<input checked="" type="checkbox"/> HNO						\$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR			CUP-2W827015-24-47	02/09/2024	02/09/2025	EACH OCCURRENCE \$ 2,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$ 2,000,000
	DED						RETENTION \$
D	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	N/A		UB-7P169499-24-47-G	02/09/2024	02/09/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000
E	Professional Liability			0100224797-1	02/09/2024	02/09/2025	Each Claim \$1,000,000
							Aggregate Limit \$1,000,000
							Each Claim Deductible \$25,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

City of Hollywood is named as Additional Insured with respects to General Liability and Automobile Liability.

**CERTIFICATE HOLDER****CANCELLATION**City of Hollywood  
2600 Hollywood Blvd

Hollywood

FL 33020

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

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**From:** [Certificate of Insurance](#)  
**To:** [Maria Gonzalez](#); [Certificate of Insurance](#)  
**Subject:** RE: [EXT]RE: High Tech COI  
**Date:** Thursday, February 15, 2024 10:03:25 AM  
**Attachments:** [City of Hollywood, 2600 Hollywood Blvd, Hollywood, FL, 33020.pdf](#)  
[image001.png](#)  
[image002.png](#)  
[image003.jpg](#)

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Hello,

The COI is acceptable.

Thanks,

Stacy

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**From:** Maria Gonzalez <MAGONZALEZ@hollywoodfl.org>  
**Sent:** Thursday, February 15, 2024 9:16 AM  
**To:** Certificate of Insurance <COI@hollywoodfl.org>  
**Subject:** RE: [EXT]RE: High Tech COI

Good morning,

I am waiting for your response about this COI.

Thank you,

Maria R Gonzalez  
Administrative Specialist II  
Underground Utilities  
Department of Public Utilities  
1715 N 21 Avenue  
Hollywood, Florida 33020  
Phone: 954-921-3046 Ext #5422



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**From:** Maria Gonzalez  
**Sent:** Monday, February 12, 2024 7:22 AM  
**To:** Certificate of Insurance <[COI@hollywoodfl.org](mailto:COI@hollywoodfl.org)>  
**Subject:** FW: [EXT]RE: High Tech COI

Good morning,

Here is High Tech (Locating services ) COI for your approval.

Thank you,

Maria R Gonzalez  
Administrative Specialist II  
Underground Utilities  
Department of Public Utilities  
1715 N 21 Avenue  
Hollywood, Florida 33020  
Phone: 954-921-3046 Ext #5422



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**From:** angiem insurancecg.com <[angiem@insurancecg.com](mailto:angiem@insurancecg.com)>  
**Sent:** Friday, February 9, 2024 9:42 AM  
**To:** ovidal htlocating.com <[ovidal@htlocating.com](mailto:ovidal@htlocating.com)>  
**Cc:** asanabria htlocating.com <[asanabria@htlocating.com](mailto:asanabria@htlocating.com)>; Maria Gonzalez <[MAGONZALEZ@hollywoodfl.org](mailto:MAGONZALEZ@hollywoodfl.org)>; Jaime Castillo <[JCASTILLO@hollywoodfl.org](mailto:JCASTILLO@hollywoodfl.org)>; dianar insurancecg.com <[dianar@insurancecg.com](mailto:dianar@insurancecg.com)>  
**Subject:** [EXT]RE: High Tech COI

You don't often get email from [angiem@insurancecg.com](mailto:angiem@insurancecg.com). [Learn why this is important](#)

Good Morning,

Please see the attached renewal certificate for our client.

Should you have any questions or concerns, please advise.

Best Regards

**Angie Miranda**  
**Account Executive**  
**Insurance Consulting Group, LLC**

**BROWARD BRANCH**  
1825 Main Street, Suite 102  
Weston, Florida 33326  
Tel: 954-389-4799

**DADE BRANCH**

(by appointment only)  
801 Brickell Avenue, 8<sup>th</sup> Floor  
Miami, Florida 33131  
Tel: 305-347-5651



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**From:** ovidal htlocating.com <[ovidal@htlocating.com](mailto:ovidal@htlocating.com)>  
**Sent:** Thursday, February 8, 2024 4:25 PM  
**To:** angiem insurancecg.com <[angiem@insurancecg.com](mailto:angiem@insurancecg.com)>  
**Cc:** asanabria htlocating.com <[asanabria@htlocating.com](mailto:asanabria@htlocating.com)>  
**Subject:** Fwd: High Tech COI

Angie,

Please see below. Thanks

Sincerely,

Octavio Vidal

High Tech Locating

Dir. Phone: 786-345-0986

Central: 305-412-0891

Fax: 305-412-0590

13284 SW 120th St,

Miami, Fl. 33186

[ovidal@htlocating.com](mailto:ovidal@htlocating.com)

[www.htlocating.com](http://www.htlocating.com)

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**From:** Maria Gonzalez <[MAGONZALEZ@hollywoodfl.org](mailto:MAGONZALEZ@hollywoodfl.org)>  
**Sent:** Thursday, February 8, 2024 3:31:21 PM  
**To:** ovidal htlocating.com <[ovidal@htlocating.com](mailto:ovidal@htlocating.com)>  
**Cc:** Jaime Castillo <[JCASTILLO@hollywoodfl.org](mailto:JCASTILLO@hollywoodfl.org)>  
**Subject:** High Tech COI

Good afternoon Mr. Vidal:

Our records show that your COI is expiring. Please send us an updated COI at your earliest convenience.

Thank you,

Maria R Gonzalez  
Administrative Specialist II  
Underground Utilities  
Department of Public Utilities  
1715 N 21 Avenue  
Hollywood, Florida 33020  
Phone: 954-921-3046 Ext #5422



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***Maria Gonzalez***

Administrative Specialist II  
City of Hollywood  
Public Utilities

P.O. Box 229045  
Hollywood, FL 33022-9045  
Office:  
E-mail: [MAGONZALEZ@hollywoodfl.org](mailto:MAGONZALEZ@hollywoodfl.org)



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