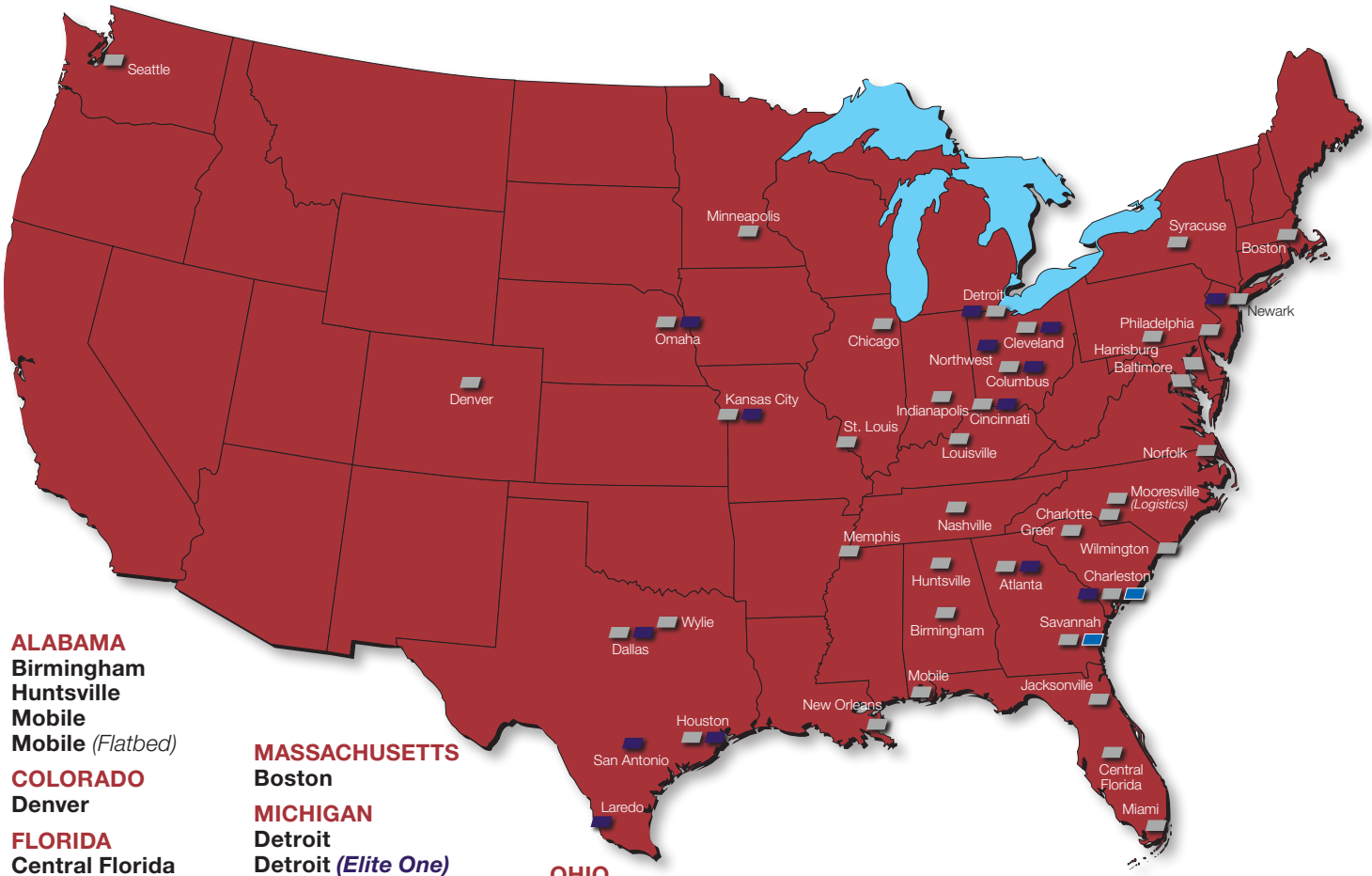
Horizon Locations & Subsidiaries



ALABAMA
Birmingham
Huntsville
Mobile
Mobile *(Flatbed)*

COLORADO
Denver

FLORIDA
Central Florida
Jacksonville
Miami

GEORGIA
Atlanta (2)
Atlanta ***(Elite One)***
Atlanta *(Pioneer)*
Savannah
Savannah ***(CCI)***

ILLINOIS
Chicago (2)

INDIANA
Indianapolis

KENTUCKY
Louisville

LOUISIANA
New Orleans

MARYLAND
Baltimore

MASSACHUSETTS
Boston

MICHIGAN
Detroit
Detroit ***(Elite One)***

MINNESOTA
Minneapolis

MISSOURI
Kansas City
Kansas City ***(Elite One)***
St. Louis

NEBRASKA
Omaha
Omaha ***(Elite One)***

NEW JERSEY
Newark ***(Elite One)***
Neward

NEW YORK
Syracuse

NORTH CAROLINA
Charlotte
Mooresville *(Logistics)*
Wilmington

OHIO
Cincinnati
Cincinnati ***(Elite One)***
Cleveland (2)
Cleveland ***(Elite One)***
Columbus
Columbus ***(Elite One)***
Northwest ***(Elite One)***

PENNSYLVANIA
Harrisburg
Philadelphia

SOUTH CAROLINA
Charleston
Charleston *(Pioneer)*
Charleston ***(CCI)***
Charleston ***(Elite One)***
Greer

TENNESSEE
Memphis
Nashville

TEXAS
Dallas
Dallas ***(Elite One)***
Houston
Houston ***(Elite One)***
Laredo ***(Elite One)***
San Antonio ***(Elite One)***
Wylie

VIRGINIA
Norfolk

WASHINGTON
Seattle

Corporate Administration/Sales:	Phone	Fax
Corporate Headquarters: 8777 Rockside Rd, Cleveland, OH 44125 www.horizonfreightsystem.com Hours: 7:00 am - 6:00 pm Eastern	216-341-7410 800-480-6829	216-429-3523
Customer Remittance: PO Box 70242, Cleveland, OH 44190-0242	–	–
Banking Information: Key Bank Mailcode: OH-01-27-1203 127 Public Square,12th floor, Cleveland, OH 44114 Jay McKelvey	–	–
Collections/Billing: Collections@horizonfreightsystem.com	800 480-6829 Ext.:164, 169	

To better serve you, we are always adding new locations. For terminal updates, please check our website at **horizonfreightsystem.com**.

For any pricing, sales or operational questions, contact our sales/operations department at **Pricing@horizonfreightsystem.com**. You can always call Horizon at **800-480-6829**.

HORIZON
FREIGHT SYSTEM, INC.

Horizon Locations & Subsidiaries

HORIZON FREIGHT SYSTEM, INC

MC #169607
DOT #237360
SCAC - HZNF
EIN 34-1380439
HM 77148

Service Locations:	Email
Chicago South, IL	Dispatch@CHIHorizon.com
Chicago North, IL	Team@rinaratransportation.com
Detroit, MI	Detroit@horizonfreightsystem.com
Harrisburg, PA	Harrisburg@horizonfreightsystem.com
Houston, TX	Dispatch@houstonhznf.com
Mooresville, NC (Logistics)	DinaB@horizonfreightsystem.com
Miami, FL	Pricing@horizonfreightsystem.com
New Orleans, LA	Monica.HorizonFreight@gmail.com
Seattle, WA	Dispatch@cgrtransport.com
Syracuse, NY	UpstateNY@horizonfreightsystem.com

HORIZON MID-ATLANTIC

MC #770152
DOT #2255867
SCAC - HMAC
EIN 45-4018659
HM 151623

Service Locations:	Email
Atlanta, GA (Pioneer)	Atlanta@PioneerLogisticsSolutions.com
Boston, MA	HorizonBoston@horizonfreightsystem.com
Charleston, SC	Charleston735@horizonfreightsystem.com
Charleston, SC (Pioneer)	Charleston@PioneerLogisticsSolutions.com
Charlotte, NC	MirandaM@horizonfreightsystem.com, TraceyM@horizonfreightsystem.com
Greer, SC	HorizonGreer@horizonfreightsystem.com
Newark, NJ	HorizonNJ@horizonfreightsystem.com
Philadelphia, PA	Philadelphia@horizonfreightsystem.com

HORIZON MIDWEST

MC #791331
DOT #2317693
SCAC - HZMQ
EIN 45-5505710
HM 158086

Service Locations:	Email
Baltimore, MD	Baltimore@horizonfreightsystem.com
Birmingham, AL (53' Van Freight Only)	Birmingham@horizonfreightsystem.com
Birmingham, AL	Birmingham@horizonfreightsystem.com
Cincinnati, OH	CinciOps@horizonfreightsystem.com
Cleveland, OH	ClevelandOps@horizonfreightsystem.com
Columbus, OH	ColumbusOps@horizonfreightsystem.com
Dallas, TX	Dispatch@horizondallas.com
Denver, CO	Denver@horizonfreightsystem.com
Huntsville, AL	Huntsville@horizonfreightsystem.com
Indianapolis, IN	IndyCs@rykilogistics.com
Louisville, KY	LouCs@rykilogistics.com
Mobile, AL (Intermodal)	MobileIntermodal@horizonfreightsystem.com
Minneapolis, MN	Minneapolis@horizonfreightsystem.com
Norfolk, VA	Chesapeake@horizonfreightsystem.com
Omaha, NE	Omaha@horizonfreightsystem.com
Wylie, TX	WylieOps@horizonfreightsystem.com

ELITE ONE INTERMODAL

(A subsidiary of Horizon Midwest)

MC #791331
DOT #2317693
SCAC - HZEM
EIN 85-0913003
PHSMA 062314-550-045W

Service Locations:	Email
Atlanta, GA (Elite One)	ATLOPS@eliteoneintermodal.com
Charleston, SC (Elite One)	PMathis@MathisLLC.com
Cincinnati, OH (Elite One)	CVG@eliteoneintermodal.com
Cleveland, OH (Elite One)	CLV@eliteoneintermodal.com
Columbus, OH (Elite One)	CMH@eliteoneintermodal.com
Dallas, TX (Elite One)	Dispatch@DFTTX.com
Detroit, MI (Elite One)	DTW@eliteoneintermodal.com
Houston, TX (Elite One)	Dispatch@eliteonehtx.com
Kansas City, MO (Elite One)	EliteKC@eliteoneintermodal.com
Laredo, TX (Elite One)	Dispatch@DFTTX.com
Newark, NJ (Elite One)	NYC@TruckSSI.com
Northwest Ohio (Elite One)	NBaltimore@eliteoneintermodal.com
San Antonio, TX (Elite One)	Dispatch@DFTTX.com

HORIZON SOUTH

MC #791344
DOT #2318070
SCAC - HZSN
EIN 45-5487224
HM 158089

Service Locations:	Email
Atlanta, GA	AtlantaDispatch@horizonfreightsystem.com
Atlanta (Douglasville), GA	CHarris1254@hotmail.com
Central Florida	Dispatch264@horizonfreightsystem.com
Jacksonville, FL	Jacksonville@horizonfreightsystem.com
Savannah, GA	ACrawford@GAIntermodal.com
Wilmington, NC	McNeill.Bo@gmail.com

HORIZON WEST

MC #791357
DOT #2318092
SCAC - HZWI
EIN 45-5477791
HM 158090

Service Locations:	Email
Kansas City, MO	KansasCityDispatch@horizonfreightsystem.com
Memphis, TN	HorizonMem@horizonfreightsystem.com
Mobile, AL (Flatbed/Over-Dimensional)	Dispatch@HorizonWest.us
Nashville, TN	Nashville@rykilogistics.com
St. Louis, MO	StLouis@horizonfreightsystem.com

CONTAINER CONNECTION INTERMODAL

(A subsidiary of Horizon West)

MC #791357
DOT #2318092
SCAC - HWIH
EIN 88-2887146

Service Locations:	Email
Charleston, SC (CCI)	CCICHS@thecciteam.com
Savannah, GA (CCI)	CCIGroup@thecciteam.com

U.S. Department of Transportation
Federal Motor Carrier Safety Administration

1200 New Jersey Ave., S.E.
Washington, DC 20590

SERVICE DATE
July 20, 2012

PERMIT
MC-791344-P
U.S. DOT No. 2318070
HORIZON SOUTH INC
CLEVELAND, OH

This Permit is evidence of the carrier's authority to engage in transportation as a **contract carrier of property (except household goods)** by motor vehicle in interstate or foreign commerce.

This authority will be effective as long as the carrier maintains compliance with the requirements pertaining to insurance coverage for the protection of the public (49 CFR 387) and the designation of agents upon whom process may be served (49 CFR 366). Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

Service must be performed under a continuing agreement with one or more persons.

Jeffrey L. Secrist, Chief
Information Technology Operations Division

NOTE: Willful and persistent noncompliance with applicable safety fitness regulations as evidenced by a DOT safety fitness rating of "Unsatisfactory" or by other indicators, could result in a proceeding requiring the holder of this certificate or permit to show cause why this authority should not be suspended or revoked.

PMO

DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection

OMB No. 1651-0050 Exp: 03/31/2014

CUSTOMS BOND

19 CFR Part 113

CBP USE ONLY	BOND NUMBER (Assigned by CBP)
	9912JN326

Broker Filer Code: WYB Surety Reference Number: 120719011/09088543

In order to secure payment of any duty, tax or charge and compliance with law or regulation as a result of activity covered by any condition referenced below, we, the below name principal(s) and surety(ies), bind ourselves to the United States in the amount or amounts, as set forth below.

Execution Date: 07-24-2012

SECTION I – Select Single Transaction OR Continuous Bond (not both) and fill in the applicable blank spaces.

☐ SINGLE TRANSACTION BOND	Identification of transaction secured by this bond (e.g., entry number, seizure number, etc.) XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Transaction Date XXXXXXXXXXXXX	Port Code
☒ CONTINUOUS BOND	Effective Date 08-01-2012	This bond remains in force for one year beginning with the effective date and for each succeeding annual period, or until terminated. This bond constitutes a separate bond for each period in the amounts listed below for liabilities that accrue in each period. The intention to terminate this bond must be conveyed within the period and manner prescribed in the CBP Regulations.	

SECTION II – This bond includes the following agreements. Check one box only. (Except 3a may be checked independently or with 3.)

Activity Code	Activity Name and CBP Regulations in which conditions codified	Limit of Liability	Activity Code	Activity Name and CBP Regulations in which conditions codified	Limit of Liability
☐ 1	Importer or broker .....§113.62	XXXXXXXXXXX	☐ 8	Detention of Copyrighted Material .....§113.70 -Single Transaction Only-	XXXXXXXXXXX
☐ 1a	Drawback Payments Refunds .....§113.65	XXXXXXXXXXX	☐ 9	Neutrality .....§113.71 -Single Transaction Only-	XXXXXXXXXXX
☒ 2	Custodian of Bonded Merchandise §113.63 (Includes bonded carriers, freight forwarders, cartmen and lightermen, all classes of warehouse, container station operators) -Continuous Bond Only-	50,000.00	☐ 10	Court Costs for Condemned Goods .....§113.72 -Single Transaction Only-	XXXXXXXXXXX
☐ 3	International Carrier.....§113.64	XXXXXXXXXXX	☐ 11	Airport Security Bond.....Part 113 App A	XXXXXXXXXXX
☐ 3a	Instruments of International Traffic... §113.66 -Continuous Bond Only-	XXXXXXXXXXX	☐ 12	International Trade Commission (ITC) Exclusion Bond.....Part 113 App B	XXXXXXXXXXX
☐ 4	Foreign Trade Zone.....§113.73 -Continuous Bond Only-	XXXXXXXXXXX	☐ 14	In-Bond Export Consolidation Bond	XXXXXXXXXXX
☐ 5	Public Gauger:..... §113.67	XXXXXXXXXXX	☐ 15	Intellectual Property Rights (IPR)	XXXXXXXXXXX
☐ 6	Wool & Fur Products,..... §113.68 Labeling Acts Importation -Single Transaction Only-	XXXXXXXXXXX	☐ 16	Importer Security Filing (ISF) .....Part 113 App D	XXXXXXXXXXX
☐ 7	Bill of Lading.....§113.69 -Single Transaction Only-	XXXXXXXXXXX	☐ 17	Marine Terminal Operator -Continuous Bond Only-	XXXXXXXXXXX

PRINCIPAL

Name and Physical Address (including legal description and state of incorporation)	By checking the box you agree that you have a seal in accordance with 19 CFR 113.25 ▸	AFFIX SEAL or Check Box
Horizon South, Inc 6600 Bessemer Avenue Cleveland, OH 44127 (OH Corporation)	CBP Identification Number: 45-548722400 Signature James B. Gifford Vice President	☒ Check Box

Principal and surety agree that any charge against the bond under any of the listed names is as though it was made by the principal(s). Principal and surety agree that they are bound to the same extent as if they executed a separate bond covering each set of conditions incorporated by reference to the CBP regulations into this bond. If the surety fails to appoint an agent under Title 31, United States Code, Section 9306, surety consents to service on the Clerk of any United States District Court or the U.S. Court of International Trade, where suit is brought on this bond. That clerk is to send notice of the service to the surety at: ▸

Mailing Address Requested by the Surety
6 Mill Ridge Lane
Chester, NJ 07930

SURETY

Name and Physical Address (including legal description and state of incorporation)	Surety Number	Agent ID Number	
The Fidelity & Deposit Company of Maryland 1400 American Lane, Tower I Schaumburg, IL 60196 (MD Corporation)	281	145-84-0753	FIDELITY AND DEPOSIT COMPANY OF MARYLAND SEAL ☐ Check Box
	Signature Kevin J. Daily, Atty-in-Fact		

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ **Go to *www.irs.gov/FormW9* for instructions and the latest information.**

Give Form to the requester. Do not send to the IRS.

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Horizon South, Inc

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☑ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) 5

Exemption from FATCA reporting code (if any) N/A

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
8777 Rockside Road

Requester's name and address (optional)

6 City, state, and ZIP code
Cleveland, OH 44125

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

			–			–				

or

Employer identification number

4	5	–	5	4	8	7	2	2	4

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here | **Signature of U.S. person** ▶ Joseph Mauro | **Date** ▶ 05/20/2019

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, *later.*

Alliance for Uniform HazMat Transportation Procedures
Uniform Program Credentials

ALLIANCE
FOR UNIFORM
HAZMAT
TRANSPORTATION
PROCEDURES

HORIZON SOUTH INC

8777 ROCKSIDE RD

CLEVELAND, OH 44125

USDOT Census #: **2318070**

ICC#: **791344**

EPA Transporter IDs: -

Intrastate Motor Carrier #: 19049

Phone Number to call in case of an accident or emergency: (866) 428-1513

Uniform Program ID: **UPM-2318070-WV**

Certified By: **Kimberly P. Hildreth**

Issuance Date: **02-Jun-23** Expiration Date: **30-Jun-24**

Issuing Agency: **Public Service Commission of West Virginia**

Agency Phone Number: **(304) 340-0456**

STATE OF WEST VIRGINIA
MONTANI SEMPER LIBERI

UNITED STATES OF AMERICA
DEPARTMENT OF TRANSPORTATION
PIPELINE AND HAZARDOUS MATERIALS SAFETY ADMINISTRATION

HAZARDOUS MATERIALS CERTIFICATE OF REGISTRATION FOR REGISTRATION YEAR(S) 2023-2024

Registrant: HORIZON SOUTH, INC.
ATTN: evelyn golden
8777 ROCKSIDE RD
CLEVELAND, OH 44125

This certifies that the registrant is registered with the U.S. Department of Transportation as required by 49 CFR Part 107, Subpart G.

This certificate is issued under the authority of 49 U.S.C. 5108. It is unlawful to alter or falsify this document.

Reg. No: 052523550049F Effective: July 1, 2023 Expires: June 30, 2024

HM Company ID: 158089

Record Keeping Requirements for the Registration Program

The following must be maintained at the principal place of business for a period of three years from the date of issuance of this Certificate of Registration:

(1) A copy of the registration statement filed with PHMSA; and

(2) This Certificate of Registration

Each person subject to the registration requirement must furnish that person's Certificate of Registration (or a copy) and all other records and information pertaining to the information contained in the registration statement to an authorized representative or special agent of the U. S. Department of Transportation upon request.

Each motor carrier (private or for-hire) and each vessel operator subject to the registration requirement must keep a copy of the current Certificate of Registration or another document bearing the registration number identified as the "U.S. DOT Hazmat Reg. No." in each truck and truck tractor or vessel (trailers and semi-trailers not included) used to transport hazardous materials subject to the registration requirement. The Certificate of Registration or document bearing the registration number must be made available, upon request, to enforcement personnel.

For information, contact the Hazardous Materials Registration Manager, PHH-52, Pipeline and Hazardous Materials Safety Administration, U.S. Department of Transportation, 1200 New Jersey Avenue, SE, Washington, DC 20590, telephone (202) 366-4109.

Wednesday, 17 May 2023

EVELYN GOLDEN
HORIZON SOUTH INC
6600 BESSEMER AVENUE
CLEVELAND, OH 44127

CERTIFICATE OF STANDARD CARRIER ALPHA CODE (SCAC)

The Standard Carrier Alpha Code of **HZSN** has been assigned to:

HORIZON SOUTH INC
6600 BESSEMER AVENUE
CLEVELAND, OH 44127
MC - 0791344
US DOT - 2318070

This Alpha Code will apply only to the company name shown above through Sunday, 30 June 2024. Approximately two months prior to expiration of this SCAC, NMFTA will provide an invoice for renewal which must be promptly returned together with payment to ensure its continued validity. Should the company name, address or contact information need an update, please notify the National Motor Freight Association, Inc. at customerservice@nmfta.org.

Alpha Codes ending with the letter 'U' have been reserved for the identification of freight containers. If your Alpha Code ends with the letter 'U', it should be used only for this purpose. A non-U ending Alpha Code should be obtained to satisfy other requirements such as company identification for Customs, Electronic Data Interchange, freight payments, etc.

If you participate in the Customs & Border Protection (CBP) ACE program and you have an issue with using your SCAC with ACE, please contact CBP at the following email address: AMSSCAC@cbp.dhs.gov. All SCACs are automatically uploaded to ACE within 24 hours. To participate in the Automated Export System (AES) program, please email AMSSCAC@cbp.dhs.gov and askaes@census.gov a request, along with a copy of the NMFTA SCAC letter, to enable your SCAC for AES. Additional information on CBP's automated programs can be found at: https://www.cbp.gov/trade/automated/getting-started.

NOTICE: of the above listed SCAC is unrelated to participation in the National Motor Freight Classification (NMFC). Further, it does not confer membership in the National Motor Freight Traffic Association, Inc. nor allow use of the NMFC in connection with freight rates. For participation and membership information, please call (703) 838-1810.

1001 North Fairfax Street • Suite 600 • Alexandria, VA 22314-1798 • ph: 703.838.1810 • fax: 703.683.1094 web: www.nmfta.org • email: scac@nmfta.org

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 8/28/2023

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).

PRODUCER Hylant Group, Inc. - Cleveland 6000 Freedom Sq Dr, Ste 400 Independence OH 44131	**CONTACT NAME:** Diana Wallace **PHONE (A/C, No, Ext):** 216-447-1050 **FAX (A/C, No):** 216-447-4088 **E-MAIL ADDRESS:** cleveland_hmi@hylant.com
INSURED KAPLA-4 Horizon South, Inc. 8777 Rockside Road Cleveland, OH 44125	**INSURER(S) AFFORDING COVERAGE** / **NAIC #** **INSURER A :** Old Republic Insurance Company 24147 **INSURER B :** Nationwide Mutual Insurance Co 23787 **INSURER C :** Travelers Prop Cas Co of Amer 25674 **INSURER D :** **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** 889547415 **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	X **COMMERCIAL GENERAL LIABILITY** CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO-JECT LOC OTHER:			MWZY31783423	9/1/2023	9/1/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG 	$ 2,000,000 $ 1,000,000 $ 5,000 $ 2,000,000 $ 2,000,000 $ 2,000,000 $
A	**AUTOMOBILE LIABILITY** X ANY AUTO OWNED AUTOS ONLY / SCHEDULED AUTOS X HIRED AUTOS ONLY / X NON-OWNED AUTOS ONLY			MWTT31415123	9/1/2023	9/1/2024	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) 	$ 2,000,000 $ $ $ $
	UMBRELLA LIAB OCCUR **EXCESS LIAB** CLAIMS-MADE DED RETENTION $						EACH OCCURRENCE AGGREGATE 	$ $ $
B	**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY** ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N: N **(Mandatory in NH)** If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		ACP WC013210950242	9/1/2023	9/1/2024	X PER STATUTE / OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ 1,000,000 $ 1,000,000 $ 1,000,000
C A	Motor Truck Cargo Phys Dam Incl Trailer Interchange			QT-630-1R772156-TIL-23 MWTT31415123	9/1/2023 9/1/2023	9/1/2024 9/1/2024	$100,000 ACV	

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

Cargo deductible is $10,000.

CERTIFICATE HOLDER

Evidence of Insurance
'-
'- '- '-

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

Nicholas R Hylant

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