





## ADDITIONAL REMARKS SCHEDULE

AGENCY <b>Eustis Insurance, Inc.</b>		NAMED INSURED <b>Correct Door, Inc.</b> Attn: Mr. Danny Lewis 2 Sussex St Kenner, LA 70062	
POLICY NUMBER <b>SEE PAGE 1</b>		EFFECTIVE DATE: <b>SEE PAGE 1</b>	
CARRIER <b>SEE PAGE 1</b>	NAIC CODE <b>SEE P 1</b>		

## ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

## Description of Operations/Locations/Vehicles:

General Liability form # KDCXP-0015 (01-17)- Additional Insured- Primary and Non-Contributory

General Liability form # KDCXP-0003 (01-17)- includes Waiver of Transfer of Rights of Recovery

Automobile form # KDCXA-0003 (01-17)- includes Any person or organization to whom you become obligated to include as additional insured under this policy

Automobile form # KDCXA-0003 (01-17)- includes Blanket Waiver of Transfer of Rights of Recovery

Automobile form # KDCXA- 0005 Additional Insured- Primary and Noncontributory

Worker's Comp. form # WC 00 03 13 00 - 001- Waiver of Our Right to Recover From Others Endorsement- Any person or organization for which the insured has agreed by written contract

Umbrella form 80517 (11/09)