



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
5/8/2025

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.

PRODUCER Arthur J. Gallagher Risk Management Services, LLC 1160 N Town Center Dr Ste 300 Las Vegas NV 89144		CONTACT NAME: Dirk Olsen PHONE (A/C, No, Ext): 702-647-2333 E-MAIL ADDRESS: dirk_olsen@ajg.com PRODUCER CUSTOMER ID: PEMALLC-01		FAX (A/C, No): 702-647-5433
License#: 0D69293		INSURER(S) AFFORDING COVERAGE		
INSURED Pem-Air Turbine Engine Services, LLC 15471 Technology Drive Brooksville FL 34604		INSURER A: Lexington Insurance Company		NAIC # 19437
		INSURER B:		
		INSURER C:		
		INSURER D:		
		INSURER E:		
		INSURER F:		

COVERAGES

CERTIFICATE NUMBER: 637302511

REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Locations:

1. 16300 FLIGHTPATH DRIVE, BROOKSVILLE, FL 34604 - \$5,000 Business Personal Property

See Attached...

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		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
A	<input checked="" type="checkbox"/>	PROPERTY	41-LX-018522434-5	3/5/2025	3/5/2026	BUILDING	\$
		CAUSES OF LOSS				PERSONAL PROPERTY	\$
						BUSINESS INCOME	\$
		BASIC				EXTRA EXPENSE	\$
		BROAD				RENTAL VALUE	\$
	<input checked="" type="checkbox"/>	SPECIAL				BLANKET BUILDING	\$
		EARTHQUAKE				BLANKET PERS PROP	\$
	<input checked="" type="checkbox"/>	WIND				BLANKET BLDG & PP	\$
		FLOOD					\$
						<input checked="" type="checkbox"/> Limits Below	\$
	<input type="checkbox"/>	INLAND MARINE	TYPE OF POLICY				\$
		CAUSES OF LOSS					\$
		NAMED PERILS	POLICY NUMBER				\$
							\$
	<input type="checkbox"/>	CRIME					\$
		TYPE OF POLICY					\$
							\$
							\$
	<input type="checkbox"/>	BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$
							\$
							\$
							\$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

Hernando County Board of County Commissioners
15470 Flight Path Drive
Brooksville FL 34604
USA

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

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**ADDITIONAL REMARKS SCHEDULE**Page 1 of 1

AGENCY Arthur J. Gallagher Risk Management Services, LLC		NAMED INSURED Pem-Air Turbine Engine Services, LLC 15471 Technology Drive Brooksville FL 34604
POLICY NUMBER		
CARRIER	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** 24 **FORM TITLE:** CERTIFICATE OF PROPERTY INSURANCE

DESCRIPTION OF PROPERTY:

2. 16304 FLIGHTPATH DRIVE, BROOKSVILLE, FL 34604 - \$5,000 Business Personal Property
3. 16316 FLIGHTPATH DRIVE, BROOKSVILLE, FL 34604 - \$5,000 Business Personal Property
4. 17330 SPRINGHILL DRIVE, BROOKSVILLE, FL 34604 - \$5,000 Business Personal Property

Continental Indemnity Insurance Company

CERTIFICATE OF COMMERCIAL LIABILITY INSURANCE

This certificate is issued for informational purposes only. It certifies that the policies listed in this document have been issued to the Named Insured. It does not grant any rights to any party nor can it be used, in any way, to modify coverage provided by such policies. alteration of this certificate does not change the terms, exclusions or conditions of such policies. Coverage is subject to the provisions of the policies, including any exclusions or conditions, regardless of the provisions of any other contract, such as between the certificate holder and the Named Insured. The limits shown below are the limits provided at the policy inception. Subsequent paid claims may reduce these limits.

Producer: Arthur J Gallagher Risk Management Services, LLC 2580 Foxfield Road, Suite 203 St. Charles, IL 60174	Named Insured: Pem-Air Turbine Engine Services, LLC and as endorsed 15471 Technology Drive Brooksville, FL 34604
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Certificate Holder:
Hernando County Board of County Commissioners
Address: 15800 Flight Path Drive, Brooksville, FL 33762
Insurer Name: Continental Indemnity Company
Policy Number: BAVAGLNFL011500 130869 03
Policy Effective Date: 05/21/2025
Policy Expiration Date: 05/21/2026

LIMITS OF INSURANCE

EACH OCCURRENCE LIMIT	\$ 20,000,000	
DAMAGE TO PREMISES		
RENTED TO YOU LIMIT	\$ 250,000	Any one premises
MEDICAL EXPENSE LIMIT	\$ 5,000	Any one person
PERSONAL & ADVERTISING INJURY AGGREGATE LIMIT		\$ 20,000,000
GENERAL AGGREGATE LIMIT		\$ not applicable
PRODUCTS/COMPLETED OPERATIONS AGGREGATE LIMIT		\$ 20,000,000
HANGARKEEPERS LIMIT	\$ 20,000,000	
EACH AIRCRAFT LIMIT		
EACH LOSS LIMIT	\$ 20,000,000	
HANGARKEEPER'S DEDUCTIBLE	\$ 20,000	Each Aircraft

Description of Operations/Locations/Endorsements/Special Provisions

THE CERTIFICATE HOLDER IS INCLUDED AS AN ADDITIONAL INSURED, BUT ONLY AS RESPECTS LIABILITY ARISING OUT OF OPERATIONS OF THE NAMED INSURED.


THE CERTIFICATE HOLDER IS PROVIDED A WAIVER OF SUBROGATION AS RESPECTS LIABILITY COVERAGE.

Additional Insured Status

THIS CERTIFICATE DOES NOT GRANT ANY COVERAGE OR RIGHTS TO THE CERTIFICATE HOLDER.
IF THIS CERTIFICATE INDICATES THAT THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED, THE POLICY(IES) MUST EITHER BE ENDORSED OR CONTAIN SPECIFIC LANGUAGE PROVIDING THE CERTIFICATE HOLDER WITH ADDITIONAL INSURED STATUS. THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED ONLY TO THE EXTENT INDICATED IN SUCH POLICY LANGUAGE OR ENDORSEMENT.

Cancellation

In the event of cancellation of any policy described above, the insurer will attempt to mail thirty (30) days written notice to the certificate holder prior to the effective date of cancellation. However, failure to do so will not impose duty or liability upon the insurer, its agents or representatives, nor will it delay cancellation.

By: 
(Authorized Representative)

Date of Issue: 05/22/2025

Certificate No.: 4