

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/19/2026

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		CONTACT NAME: GLENN JONES	PHONE (A/C, No, Ext): 973-300-0009	FAX (A/C, No): 201-254-3957
	GLENN JONES INSURANCE AGCY INC.	EMAIL ADDRESS: LORRIE@GLENNAJONES.COM		
	40 RT 15	INSURER(S) AFFORDING COVERAGE		NAIC #
	LAFAYETTE NJ 07848	INSURER A: State Farm Fire and Casualty Company		25143
INSURED	FABRICLAND, INC	INSURER B:		
	DBA METROPOLITAN WINDOW FASHIONS	INSURER C:		
	270 ROUTE 22	INSURER D:		
	DUNELLEN NJ 08812	INSURER E:		
		INSURER F:		

COVERAGES

CERTIFICATE NUMBER:

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. LIMITS SHOWN ARE INCLUSIVE OF AMOUNTS REQUESTED BY THE CERTIFICATE HOLDER AND MAY NOT REFLECT POLICY LIMIT AMOUNTS IN EXCESS OF THOSE REQUESTED. *Not Applicable in WY

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	☒ COMMERCIAL GENERAL LIABILITY		90-C6-Q919-3	12/31/2025	12/31/2026	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000	
	☐ CLAIMS-MADE ☒ OCCUR						\$ 300,000	
							\$ 5,000	
							\$ 1,000,000	
							\$ 2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							
	☒ POLICY ☐ PRO-JECT ☐ LOC					PERSONAL & ADV INJURY	\$ 1,000,000	
	OTHER:					GENERAL AGGREGATE	\$ 2,000,000	
						PRODUCTS - COMP/OP AGG	\$ 2,000,000	
							\$	
B	AUTOMOBILE LIABILITY		223 9182-F31-30	06/30/2026	12/31/2026	COMBINED SINGLE LIMIT (Ea accident)	\$	
	☐ ANY AUTO						\$ 1,000,000	
	☐ OWNED AUTOS ONLY	☐ SCHEDULED AUTOS					\$ 1,000,000	
	☐ HIRED AUTOS ONLY	☐ NON-OWNED AUTOS ONLY					\$ 1,000,000	
	☐ AUTOS ONLY						\$	
	UMBRELLA LIAB	☐ OCCUR				EACH OCCURRENCE	\$	
	EXCESS LIAB	☐ CLAIMS-MADE				AGGREGATE	\$	
	DED ☐ RETENTION \$						\$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y / N	90-CX-S534-2	12/31/2025	12/31/2026	☒ PER STATUTE ☐ OTHER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	☒ N				N / A	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
A	SURETY BOND		90-C7-R584-4	03/13/2026	03/13/2027		\$50,000	

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

CERTIFICATE HOLDER

CANCELLATION

New Jersey Office of Attorney General Division of Consumer Affairs Regulated Business Section - Attn: Home Improvement Unit 124 Halsey Road, Newark NJ 07102	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 