

# COMPANY CREDENTIALS

State of MN contractor's license



MINNESOTA DEPARTMENT  
LABOR & INDUSTRY

## RESIDENTIAL BLDG CONTRA

Construction Codes and Licensing Division  
Website: [www.dli.mn.gov/ccld.asp](http://www.dli.mn.gov/ccld.asp)

Email

443 Lafayette Road N St. Paul, MN 55155  
Phone: 651.284.5034

This is to certify that the certificate holder is licensed as a RESIDENTIAL BUILDING CONTRACTOR in the state of Minnesota and is in compliance with Minnesota Statutes 326B.805, and may build residential real estate, contract or offer to contract with an owner to build residential real estate, and contract with an owner to provide existing residential real estate; provide liability insurance, and work as a responsible individual is at all times and the certificate holder maintains compliance

License : RESIDENTIAL BLDG CONTRACTOR  
Lic Number : BC648794 LUTHER CONSTRUCTION  
Effective Date : 04/01/2018 DBA EXCEL ROOFING  
Expiration Date : 03/31/2020 13431 EVERGREEN LN  
DAYTON, MN 55327

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VERIFY UP-TO-DATE STATUS

AT [www.dli.mn.gov/ccld/LicVerif](http://www.dli.mn.gov/ccld/LicVerif)

BETTER BUSINESS BUREAU  
BBB ACCREDITED BUSINESS SINCE 2/26/2010  
Excel Roofing

Additional Locations  
Phone: (763) 712-0757

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

This company has maintained the Better Business Bureau accreditation and has earned an A+ rating

## LICENSE/CERTIFICATE/REGISTRATION DETAIL

Class Type: **RESIDENTIAL  
BLDG  
CONTRACTOR** Number: **BC648794**

Application No: **281526** Status: **ISSUED**

Expire Date: **3/31/2020** Effect Date: **4/1/2018**

Orig Date: **5/8/2012** Print Date: **3/19/2018**

Enforcement Action: **NO**

Workplace Experience: **N/A**

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Name: **LUTHER CONSTRUCTION SERVICES INC DBA  
EXCEL ROOFING INC**

Address: **13431 EVERGREEN LN  
DAYTON , MN 55327**

Phone: **763-712-0757**

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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/12/2019

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> Fleming Agency Inc 107 E Oak St PO Box 220 Glenwood City, WI 54013	<b>CONTACT NAME:</b> Molly Nerby <b>PHONE (A/C, No, Ext):</b> 715-265-4999 <b>E-MAIL ADDRESS:</b> molly@flemingagents.com	<b>FAX (A/C, No):</b> 763-210-6899																				
	<table border="1"> <thead> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A:</td> <td>Acuity</td> <td>14184</td> </tr> <tr> <td>INSURER B:</td> <td></td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Acuity	14184	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:	
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INSURER D:																						
INSURER E:																						
INSURER F:																						
<b>INSURED</b> Luther Construction Services Inc c/o Shawn Luther 13431 Evergreen Ln N Dayton, MN 55327																						


**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.

INSTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		Z75862	06/28/2018	06/28/2019	EACH OCCURRENCE	\$ 1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
						MED EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	\$ included
						GENERAL AGGREGATE	\$ 2,000,000
						PRODUCTS - COMP/OP AGG	\$ 2,000,000
							\$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		Z75862	06/28/2018	06/28/2019	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
							\$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	CWCZ75862	06/28/2018	06/28/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT	\$ 100,000
						E.L. DISEASE - EA EMPLOYEE	\$ 100,000
						E.L. DISEASE - POLICY LIMIT	\$ 500,000

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

**CERTIFICATE HOLDER****CANCELLATION**

CERTIFICATE HOLDER	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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This certifies that

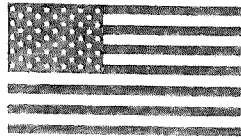
# Excel Roofing

has achieved the status of

GAF-Elk License # CE17847



for GAF-Elk (Residential Roofing Products Division),  
North America's largest roofing manufacturer.



They have pledged to insure that each customer receives  
their "best and safest choice" in roofing and are authorized  
to offer the Weather Stopper® System Plus Warranty.

Handwritten signature of Robert B. Tafaro.

Robert B Tafaro,  
President & CEO

Handwritten signature of David Harrison.

David Harrison,  
Chief Marketing Officer

Handwritten signature of Keith Sanders.

Keith Sanders,  
Vice President Sales, Steep Slope

