

# Liability Insurance Certificate

**Certificate Number:** 123456789

**Date Issued:** June 18, 2024

## Insured Details

**Name:** John Doe Enterprises

**Address:** 123 Main Street, City, Country

## Insurance Provider

**Company:** ABC Insurance Company

**Address:** 456 Insurance Ave, City, Country

## Coverage Information

**Type of Coverage:** General Liability

**Policy Number:** GL987654321

**Effective Date:** June 18, 2024

**Expiration Date:** June 18, 2025

**Coverage Amount:** \$1,000,000 per occurrence

## Certificate Holder

**Name:** XYZ Company

**Address:** 789 Business Road, City, Country

## Authorized Signature

**Name:** Jane Smith

**Title:** Insurance Agent

## Remarks