

June 6, 2019

Re:

Engineered Hardware LLC dba TorkRite

Request for Qualifications - Evidence of Bonding Capacity

To whom it may concern:

We are the surety for Engineered Hardware LLC dba TorkRite ("TorkRite"), and we confirm that they are bonded by The Guarantee Company of North America USA ("Guarantee USA"). Guarantee USA is a wholly owned affiliate of The Guarantee Co. of North America, one of Canada's largest and oldest sureties (history dating back to 1872). Guarantee USA was established to underwrite Contract Surety through its home office in Southfield, Michigan and 20 branch offices located across the United States. Guarantee USA is licensed to write Surety in all 50 states, and enjoys an A.M. Best rating of "A" (Excellent).

After conducting a thorough underwriting review of TorkRite and its ownership group, Guarantee USA has agreed to provide surety credit to TorkRite to guarantee their supply obligations in the range of \$2-2.5 million. This is not the maximum amount of surety credit available to TorkRite, but merely an indication of expected surety needs.

Our consideration and issuance of bonds is a matter solely between TorkRite and ourselves, and we assume no liability to third parties or to you by the issuance of this letter. We trust that this information meets with your satisfaction. If there are further questions, please feel free to contact me.

Sincerely,

Bruce Reiff, Attorney-in-fact

Assistant Vice President, Midwest

The Guarantee Company of North America USA

**JRICHMOND** 

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

05/31/2019

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

5005 F	edeli Group Rockside Road, Fifth Floor		CONTACT Jeff Richmond NAME: PHONE (A/C, No, Ext): (216) 643-6971  E-MAIL: A/C, No, Ext): (216) 328-8081  E-MAICH (A/C, No): (216) 328-8081							
Indepe	endence, OH 44131			ADDRE	<sub>SS:</sub> jrichmoi	nd@thefed	eligroup.com			
			INSURER(S) AFFORDING COVERAGE					NAIC#		
INCLIDED					INSURER A : Cincinnati Specialty Underwriters Insurance Company				13037	
INSURED					INSURER B:					
	Engineered Hardware LLC	₹ite	INSURER C:							
6942 Spinach Drive Mentor, OH 44060				INSUR						
	,		INSUR							
001/5			INSURER F:							
			E NUMBER:				REVISION NUMBER:			
CER	S IS TO CERTIFY THAT THE POLICI CATED. NOTWITHSTANDING ANY F TIFICATE MAY BE ISSUED OR MAY LUSIONS AND CONDITIONS OF SUCH	REQUIREN PERTAIN	MENT, TERM OR CONDIT L THE INSURANCE AFFO	ORDED B	ANY CONTRA Y THE POLIC	CT OR OTHER	R DOCUMENT WITH RESPE	CT TO	NAMICH THIS	
INSR LTR	TYPE OF INSURANCE	ADDL SUB	POLICY NUMBER	DOLLOV ETT DOLLOV EVE		LIMITS				
Α	COMMERCIAL GENERAL LIABILITY					The state of the s	EACH OCCURRENCE	s	1,000,000	
	CLAIMS-MADE X OCCUR		CSU0133712		06/01/2019	06/01/2020	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,00	
							MED EXP (Any one person)	\$	5,00	
							PERSONAL & ADV INJURY	\$	1,000,000	
G	EN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000	
>	POLICY PRODUCT LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000	
А	UTOMOBILE LIABILITY						COMBINED SINGLE LIMIT	\$		
	ANY AUTO						(Ea accident)  BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$		
	ABTOG GAET						(I di docident)	s		
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	s		
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$		
	DED RETENTION\$						ACORLOATE	\$		
W	ORKERS COMPENSATION ID EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	Ψ		
							E.L. EACH ACCIDENT	\$		
(M	IY PROPRIETOR/PARTNER/EXECUTIVE FICER/MEMBER EXCLUDED?	N/A					E.L. DISEASE - EA EMPLOYEE			
If y	res, describe under SCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT			
							E.E. BIGENOL - FOLIOT ENTIT	Ψ		
DESCRI	PTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACOR	D 101, Additional Remarks Sche	edule, may b	e attached if mor	e space is requir	red)			
CERTIFICATE HOLDER					CANCELLATION					
For Informational Purposes Only				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							