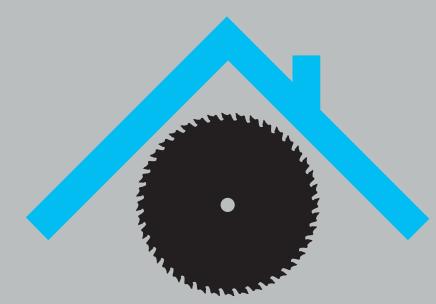


Jon Sherman Construction Co. Inc.



# Jon Sherman Construction Company, Inc. PO Box 775687 Steamboat Springs, CO 80477









Springs from New Jersey in 1990—the day after high school graduation—fulfilling his dream of living in Colorado. When he wasn't studying at Colorado Mountain College or enjoying the outdoors, Jon was beginning his construction career as a laborer on local job sites. As the years passed, Jon's enjoyment for hands-on work transformed into a love and great appreciation for high quality craftsmanship done efficiently. These core values are still what drives Jon Sherman Construction. Established in 2003,

JSC has developed into a full-service construction company, specializing in all sizes of residential and commercial new construction, remodels, and additions, as well as custom carpentry projects off all kinds. JSC offers unparalleled customer service and savings by offering "bags on" job site management with no markup to subcontractors' invoices. When Jon isn't working hard to keep your job running efficiently and affordably he enjoys spending time outdoors with his wife of nineteen years, and his two sons.





"Jon Sherman undertook major renovations to our house. Throughout the process, Jon not only was very professional, he and his team ultimately produced excellent results. Working with him to design and build the projects was surprisingly fun and enjoyable. We are already planning our next home renovation projects and looking forward to working with Jon again."

-Eric Washburn Homeowner















"Jon Sherman's exceptional professionalism was showcased in the rather large and extensive remodel of my beautiful Steamboat home. Jon's attention to detail, anticipatory guidance and thorough project management made the whole process fun and stress free. I'd recommend Jon's service as he is very capable of delivering high value, including exceptional quality, at a great price!"

> -Sue Birch Homeowner

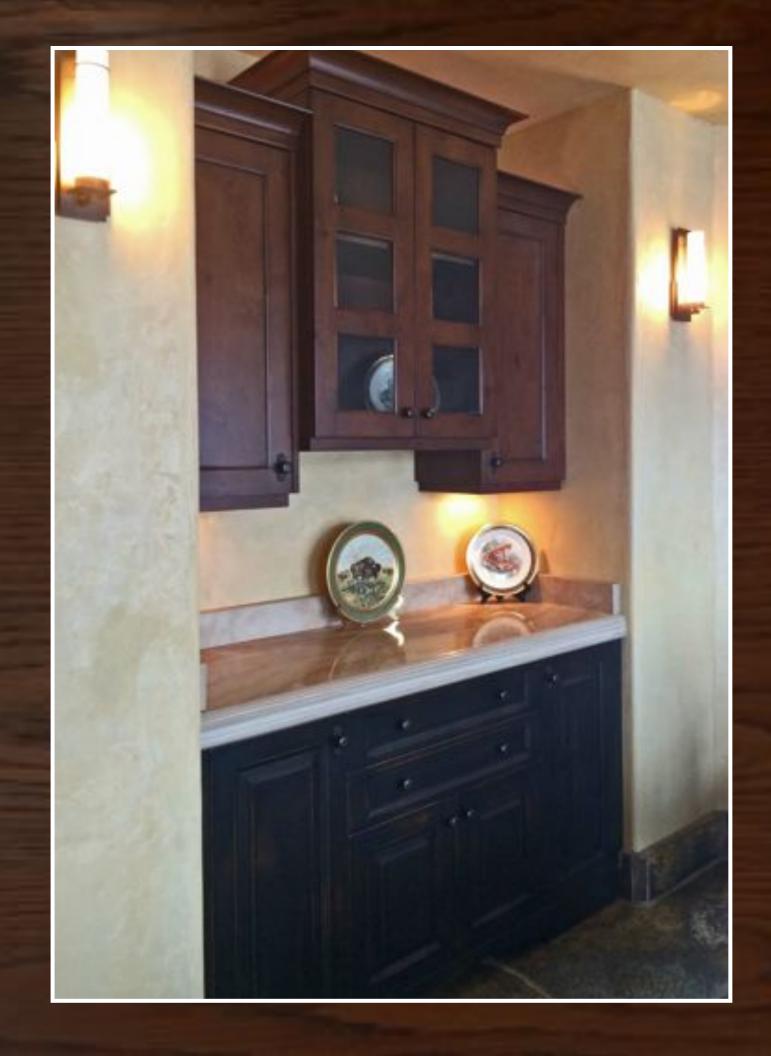




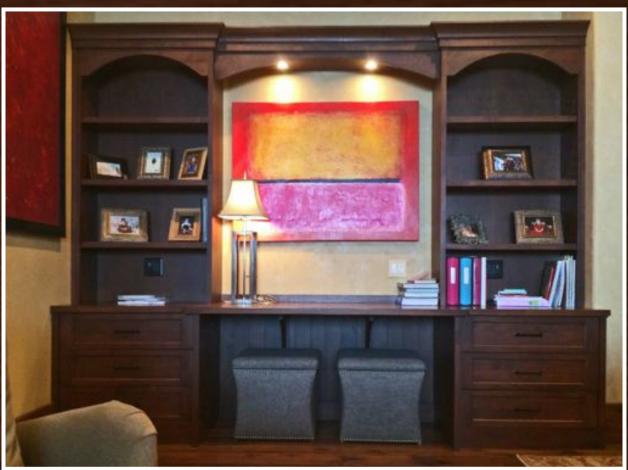








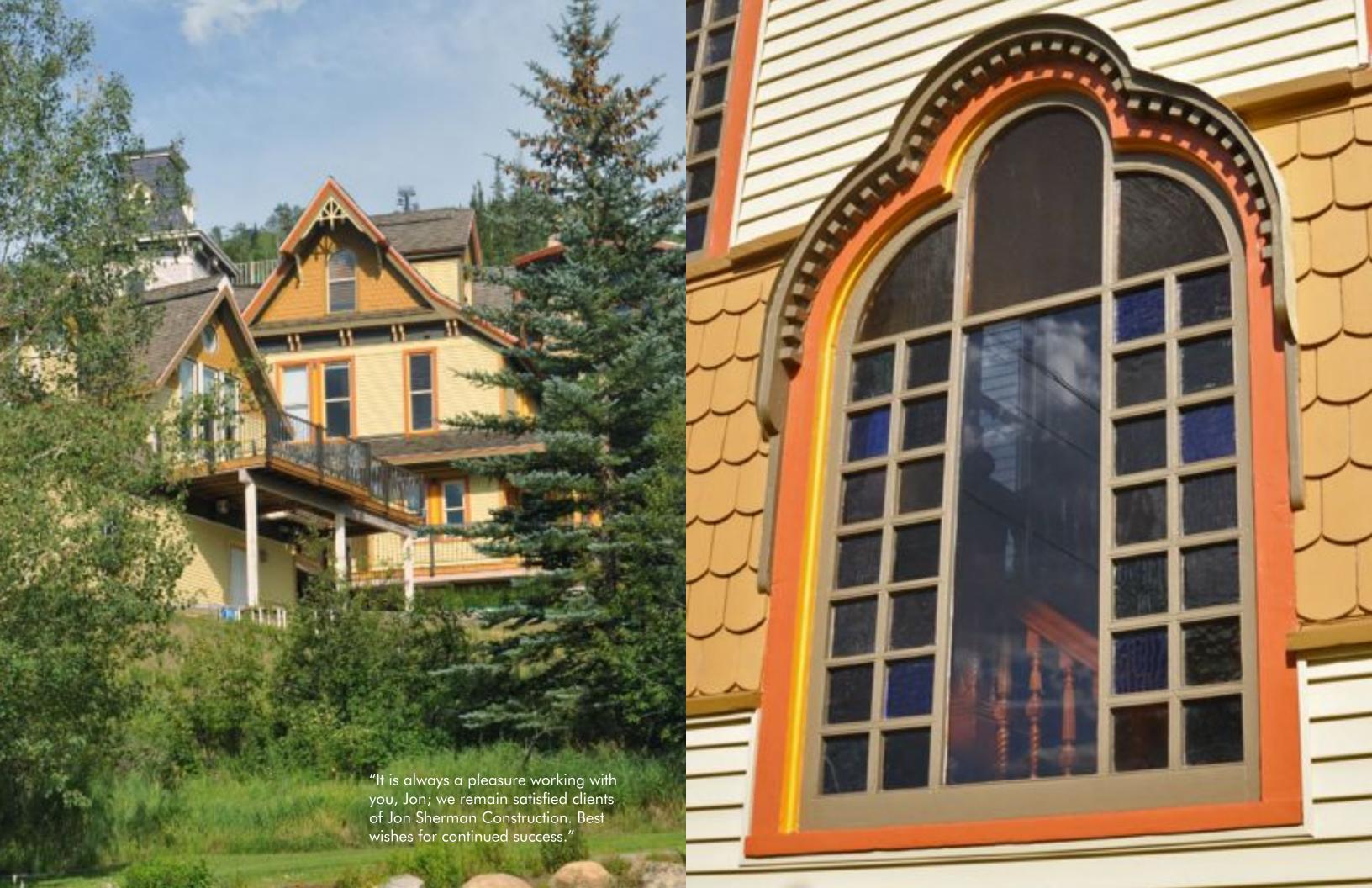






















Jon Sherman Construction Company

PO Box 775687 - Steamboat Springs, CO 80477

Office: 970.879.1202 Cell: 970.846.8125



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# **REFERENCES**

# Patricia Ezqiuerdo

padiz1109@gmail.com

## **Todd Tracy**

ttracy@vehiclesafteyfirm.com

#### Sue Birch

birchsteamboat@comcat.net

## **Eric Washburn**

eiwashburn1234@gmail.com

# **Bill Rangitsch**

wjr@steamboatarchitectural.com

## **Tom Sharp**

tom@tomsharp.com

## **Amanda Tracy**

amandatracy@me.com

# **Nancy Sanford Interior Design**

nancysanford@nancysanford.com

**Jon Sherman Constructio**n utilizes many local subcontractors to execute your project. Here is a partial list of some of the people we work with:

Archtects	Subcontractors				
Bill Rangitsch wjr@steamboatarchitectural.com	Excavator – Ed Macarther ed.macarther@nativeexcavating.com				
Jan Kaminski jan@mtnarch.com	Foundation – Steve Holmberg frontierstructures 20@gmail.com				
	Framing/Siding – Dan Vargas erindan@zirkel.us				
	Plumbing – Gibb Manzanarez gibmanz@gmail.com				
	Electrical – Jed Gibson jed@cessteamboat.com				
	Mechanical – Scott Hansen hansenmechanicalservices@com- cast.net				
	Millwork/Cabinetry – Kkevin Fedewa ewa kevin@fedewacustomworks.com				
	Nancy Sanford Interior Design nancysanford@nancysanford.com				

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#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/4/2016

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

- 1		ESENTATIVE OR PRODUCER, A	ו טוי	IIL C	EKTII ICATE HOLDEK.							
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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).												
PRO	DUCE	R				CONTA NAME:	CT					
Mountain West In & Fin Serv LLC 100 E. Victory Way					PHONE (A/C, No, Ext): (970) 824-8185 FAX (A/C, No): (970)					824-8188		
		O 81625				E-MAIL ADDRESS:						
						INSURER(S) AFFORDING COVERAGE					NAIC #	
						INSURER A : United Fire Group					13021	
INSU	RED					INSURER B:						
		Jon Sherman Construction	l			INSURE						
		PO Box 775687	IIIC			INSURER D :						
		Steamboat Springs, CO 804	77-56	87		INSURE						
	<b>/</b> FD	A050 050	TIE14	^ A TI	- NUMBER.	INSURE	KF:		DEVICION NUMBER			
					E NUMBER:		EEN IOOUED	TO THE INDIA	REVISION NUMBER:		LIOV PERIOR	
IN CI EX	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		SUBR			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	rs		
Α	Х	COMMERCIAL GENERAL LIABILITY					,	,	EACH OCCURRENCE	\$	1,000,000	
		CLAIMS-MADE X OCCUR			60369859		03/01/2015	03/01/2016	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000	
									MED EXP (Any one person)	\$	5,000	
									PERSONAL & ADV INJURY	\$	1,000,000	
	CEN	L'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000	
	X	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	2.000,000	
	<u> </u>								PRODUCTS - COMP/OP AGG	\$	2,000,000	
		OTHER:		_					COMBINED SINGLE LIMIT	<u> </u>		
	AUT	OMOBILE LIABILITY							(Ea accident)	\$		
		ANY AUTO							BODILY INJURY (Per person)	\$		
		ALL OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$		
		HIRED AUTOS NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)	\$		
										\$		
		UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
		EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
		DED RETENTION \$								\$		
		KERS COMPENSATION							PER OTH- STATUTE ER			
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE			N/A						E.L. EACH ACCIDENT	\$		
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			N/A						E.L. DISEASE - EA EMPLOYEE	\$		
	If yes	, describe under CRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
				İ								

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

CERTIFICATE HOLDER	CANCELLATION				
proof of insurance	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				
	askley Denor				
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