

BUSINESS EXPERTISE, FINANCIAL STRENGTH, INSURANCE

Business Expertise

Dennis Corporation is managed by Mr. Dan Dennis. He holds a Masters of Business Administration degree from The Citadel Evening College and a Bachelors of Civil Engineering from The Citadel. In addition to his engineering, surveying, and construction management licenses, he has over twenty years of experience in the engineering consulting business. Prior to forming Dennis Corporation, Mr. Dennis was a business unit manager for one of the largest engineering firms in the Southeast, currently ranked among the top 500 design firms in the nation. In this capacity, Mr. Dennis managed a staff of sixty employees with annual business unit revenues of \$15,000,000. He understands contracts, scoping, fee negotiations, insurance and human resource issues.

Financial Condition

Dennis Corporation's financial records are maintained by Elliott Davis of Columbia, SC, the largest accounting firm in the state of South Carolina. Elliot Davis has certified the firm's financial statements for 2008 and has stated that "the financial statements indicate solid growth in revenue and profitability." The firm's annual FAR (Federal Audit Regulations) audited overhead rates are prepared by the firm of Burkett, Burkett and Burkett of West Columbia, South Carolina.

Dennis Corporation's financial condition and credit ratings are excellent. There are no outstanding debts or litigation pending against the firm.

Dennis Corporation maintains two lines of credit; one with NBSC located in Columbia, South Carolina, and another with the City of Columbia.

Dennis Corporation has a working capital loan with the Business Development Corporation located in Columbia, South Carolina.

Insurance

Dennis Corporation maintains the maximum amount of insurance required in the engineering consulting profession. Our coverage typically exceeds our client's requirements.

Errors and Omissions Insurance – Professional Liability

\$2,000,000 per claim / \$2,000,000 Aggregate
\$15,000 or less deductible
Carrier: ACE USA

General Liability Insurance

\$1,000,000 each Occurrence
\$2,000,000 Aggregate
Carrier: Cincinnati Insurance

Automobile Liability Insurance

Owned, Non-owned and Hired
\$1,000,000 Limit
Carrier: Cincinnati Insurance

Workers Compensation – Statutory

Employers Liability
\$100,000 – Each Accident
\$500,000 – Policy Limit
\$100,000 – Each Employee
Carrier: Cincinnati Insurance

Excess Liability

\$4,000,000 – Occurrence Form
\$4,000,000 - Aggregate
Carrier: Cincinnati Insurance

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/27/2009

PRODUCER BB&T Boyle-Vaughan 1710 Gervais St. P. O. Box 8628 Columbia, SC 29202	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED Dennis Corporation 5000 Thurmond Mall Suite 114 Columbia, SC 29201	INSURER A: Peerless Indemnity Insurance Co	18333
	INSURER B: Peerless Insurance Company	24198
	INSURER C: Netherlands Insurance Company	24171
	INSURER D: Ohio Casualty Insurance Company	24074
	INSURER E:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
A		GENERAL LIABILITY	CBP1777232	10/06/2009	10/06/2010	EACH OCCURRENCE	\$1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$10,000
						PERSONAL & ADV INJURY	\$1,000,000
						GENERAL AGGREGATE	\$2,000,000
						PRODUCTS - COMP/OP AGG	\$2,000,000
						GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	
A D		AUTOMOBILE LIABILITY	BA1777226 BAAQQ002680 W.V.	10/06/2009	10/06/2010	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
		<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
		<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
		<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC AGG	\$
B		EXCESS / UMBRELLA LIABILITY	CU8714797	10/06/2009	10/06/2010	EACH OCCURRENCE	\$4,000,000
		<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$4,000,000
		<input type="checkbox"/> DEDUCTIBLE					\$
		<input type="checkbox"/> RETENTION \$					\$
C		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC1777228	10/06/2009	10/06/2010	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER	
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)				E.L. EACH ACCIDENT	\$500,000
		<input checked="" type="checkbox"/> Y/N <input type="checkbox"/> N				E.L. DISEASE - EA EMPLOYEE	\$500,000
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - POLICY LIMIT	\$500,000
		OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER Evidence of Insurance	CANCELLATION 10 Days for Non-Payment
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE <i>Chris H. Powell</i>