



## NESR ROOFING & WATERPROOFING

Established in 2021, New Era Skilled Roofing is a leading commercial and residential roofing company located in Southern California. We are certified by a variety of manufacturers including Versico, Carlisle Construction Materials, and GAF for the installation of low-slope roofing and coatings. Partnering closely with manufacturer design engineers, we deliver roof assemblies including single-ply, shingles, coatings, seamless metal roofs, waterproofing and more, that meet all required performance standards and specifications.

We offer the industry's longest workmanship warranties and assist building owners in securing Manufacturer No Dollar Limit Warranties for newly installed assemblies.

New Era Skilled Roofing provides detailed and accurate estimates to commercial building owners and general contractors using advanced industry software to ensure thorough and precise roofing proposals.

657-275-9006

[WWW.NEWERASKILLEDROOFING.COM](http://WWW.NEWERASKILLEDROOFING.COM)

600 N JEFFERSON ST. SUITE G PLACENTIA, CA 92870



**certainteed**  
SAINT-GOBAIN

 **Malarkey**<sup>®</sup>

 **VERSICO**  
ROOFING SYSTEMS

**GAF**



**PREFERRED  
CONTRACTOR**

**ASC BUILDING  
MATERIALS**  
BUILDING THE FUTURE TOGETHER

 **DURO-LAST**<sup>®</sup>  
THE WORLD'S BEST ROOF<sup>®</sup>

**Henry**<sup>®</sup>  
A **CARLISLE** COMPANY

**CARLISLE**<sup>®</sup>  
SYNTEC SYSTEMS



**Gaco**<sup>™</sup>

# Partial List of Satisfied Clients

References  
Available Upon  
Request

Urban Habitat

Regan Roofing

Inland Pacific Roofing

City of Beaumont

ARC Group, USA

NextPhase Construction, Inc.

The Altemus Company

Commercial Builders, Inc.

Menifee Union School District

Level 3 Construction, Inc.

Sierra Pacific Constructors

Reconstruction Experts

Colonial House HOA

Nautilus Reconstruction Contracting and Consulting

The Whiting-Turner Contracting Company

Motive Infrastructure Solutions

ALLOI Architecture and Construction

California Dream HOA Management

CAC Management

Mercury Insurance

EMPNLA INC.

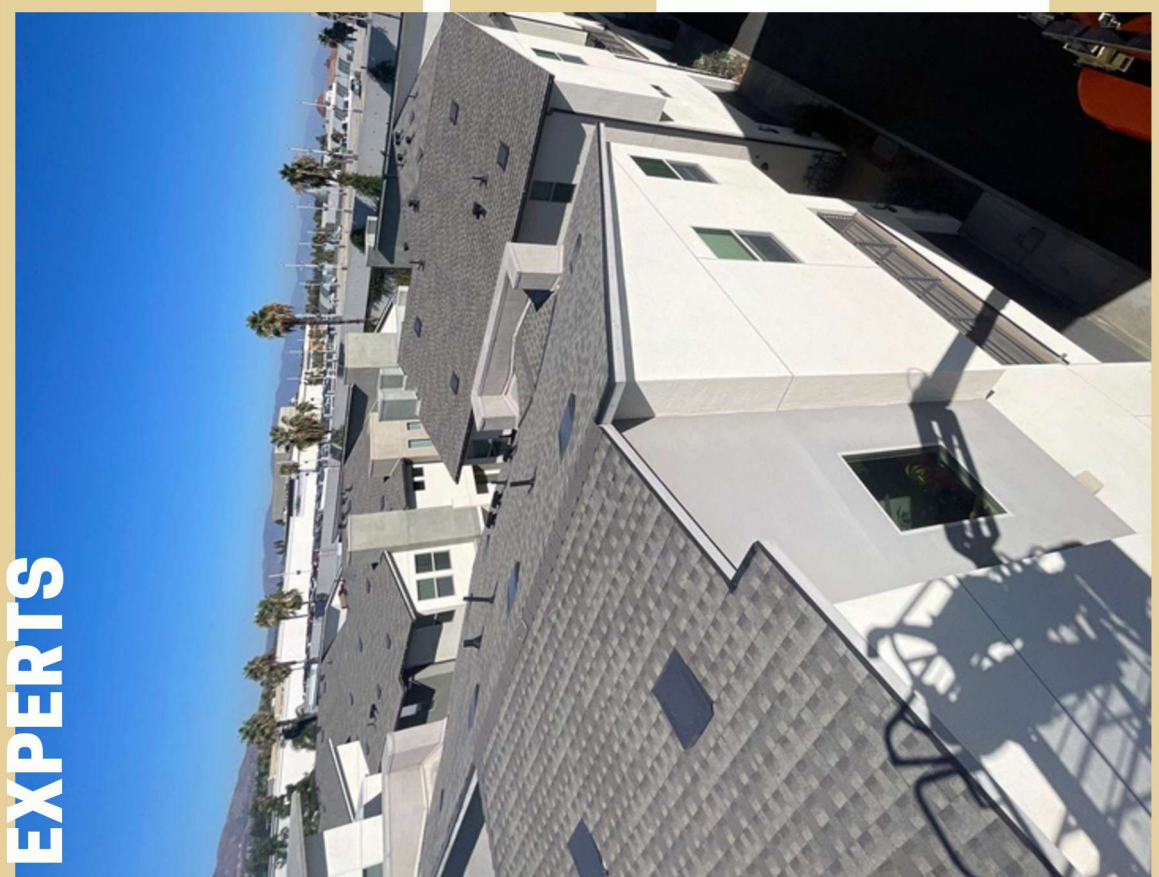
Sierra Single Ply

Juniper Construction

ADCO North

ADCO South

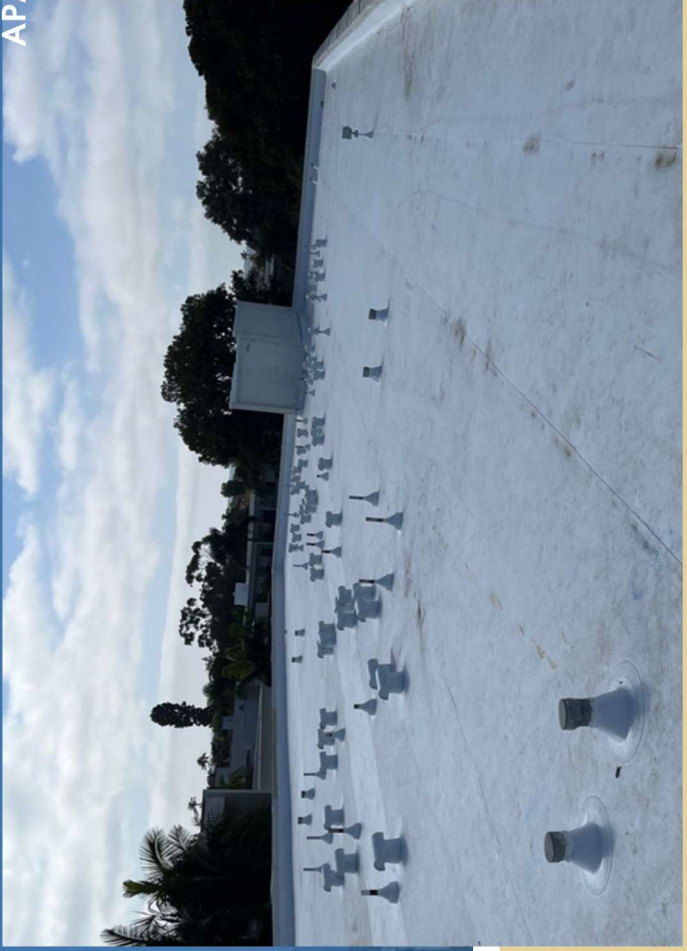
# RECONSTRUCTION EXPERTS



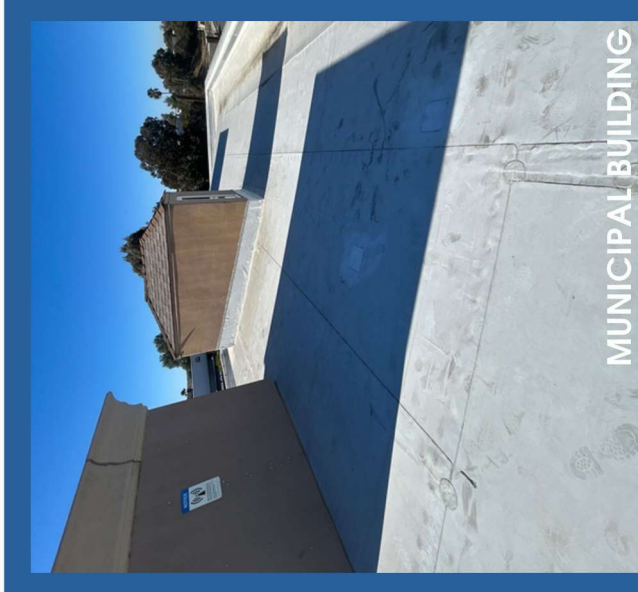
HOA  
SHINGLE ROOF MAINTENANCE

# ARC GROUP, USA

APARTMENTS  
TPO



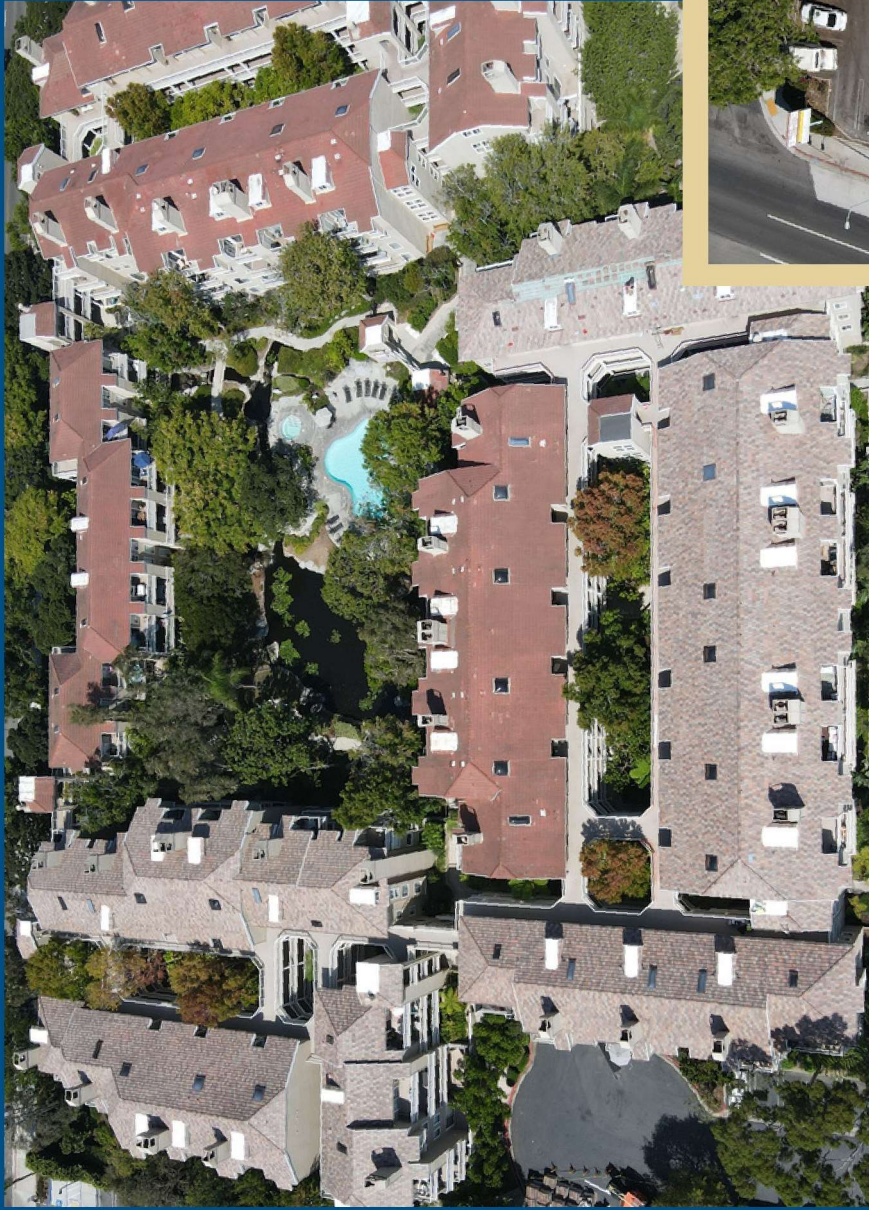
# CITY OF BEAUMONT



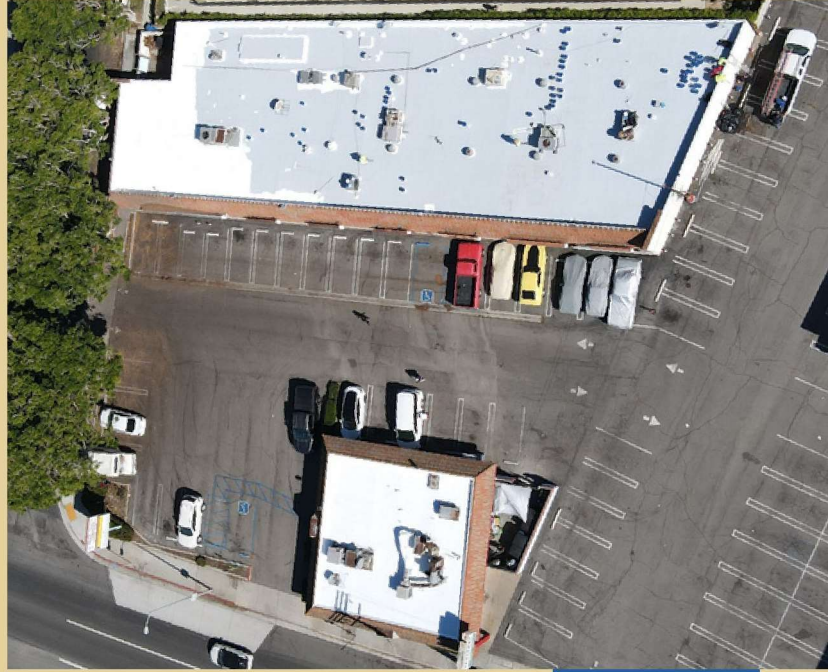
MUNICIPAL BUILDING  
TPO

# SEABRIDGE

APARTMENTS  
TILE



# ICE RINK



# COMMERCIAL SHINGLES

# HOLDREDGE

## COMMERCIAL

TPO









# INSURANCES



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
11/11/2024

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).

|            |                                                                                                             |
|------------|-------------------------------------------------------------------------------------------------------------|
| PRODUCER   | ACASURE Southwest Partners Insurance Services, LLC<br>18952 MacArthur Blvd., Suite #300<br>Irvine, CA 92612 |
| INSURED    | New Era Skilled Roofing, Inc<br>630 S Jefferson Street, Unit B<br>Placentia CA 92670                        |
| INSURER A: | Crum & Forster Specialty Insurance Co<br>44520                                                              |
| INSURER B: | California Automobile Insurance Company<br>38342                                                            |
| INSURER C: |                                                                                                             |
| INSURER D: |                                                                                                             |
| INSURER E: |                                                                                                             |
| INSURER F: |                                                                                                             |

COVERAGES  
CERTIFICATE NUMBER: 22690470  
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.

| INSURER | TYPE OF INSURANCE                                                                                                                    | POLICY NUMBER                            | POLICY PERIOD (MM/DD/YYYY) | POLICY EXPIRATION (MM/DD/YYYY) | LIMITS                                                                                                                                                                                                                          |
|---------|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|----------------------------|--------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A       | COMMERCIAL GENERAL LIABILITY<br>CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/><br>Deductible \$5,000 | GLO-108036                               | 8/10/2024                  | 8/10/2025                      | EACH OCCURRENCE<br>DAMAGE TO RENTED PREMISES (EA OCCURRENCE)<br>MED EXP (Any one person)<br>PERSONAL & ADV INJURY<br>GENERAL AGGREGATE<br>PRODUCTS - COMP/OP AGG<br>EMPLOYEES BENEFITS (EA OCCURRENCE)<br>COMBINED SINGLE LIMIT |
| B       | ANY AUTO<br>OWNED<br>AUTOS ONLY<br>HIRE<br>AUTOS ONLY                                                                                | BA0400000085146                          | 11/12/2024                 | 11/12/2025                     | BOOKLY INJURY (Per person)<br>BOOKLY INJURY (Per accident)<br>PROPERTY DAMAGE<br>E.L. DISEASE - EA EMPLOYEE<br>E.L. DISEASE - POLICY LIMIT                                                                                      |
| A       | UMBRELLA LIAB<br>EXCESS LIAB<br>CLAIMS-MADE <input checked="" type="checkbox"/> N/A                                                  | SEO-131754<br>XS over GLO/BA-Follow Form | 8/10/2024                  | 8/10/2025                      | EACH OCCURRENCE<br>AGGREGATE                                                                                                                                                                                                    |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
EVIDENCE OF INSURANCE. Certificate Holder is named as Additional Insured in regards to General Liability per the attached CG2010 12/19 and CG2037 12/19 and Auto. Insurance is Primary and Non Contributory. Waiver of Subrogation applies per the attached. 30 days notice of cancellation / 10 days notice for non payment

### CERTIFICATE HOLDER

Evidence of Insurance

### CANCELLATION

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

Dave Jacobson

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## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/08/2025

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).

|            |                                                                                                                                                                  |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PRODUCER   | Bouchar Insurance for WBS - TG<br>PO Box 6090<br>Clearwater, FL 33758-6090                                                                                       |
| INSURED    | Workforce Business Services CA, LLC Labor Contractor, for co-employees of: New Era Skilled Roofing<br>1401 Maralee Ave. West Ste 600<br>Bradenton, FL 34205-6708 |
| INSURER A: | Zurich-American Insurance Company                                                                                                                                |
| INSURER B: |                                                                                                                                                                  |
| INSURER C: |                                                                                                                                                                  |
| INSURER D: |                                                                                                                                                                  |
| INSURER E: |                                                                                                                                                                  |
| INSURER F: |                                                                                                                                                                  |

COVERAGES  
CERTIFICATE NUMBER: 24FL079115427  
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.

| INSURER | TYPE OF INSURANCE                                                                                                         | POLICY NUMBER   | POLICY PERIOD (MM/DD/YYYY) | POLICY EXPIRATION (MM/DD/YYYY) | LIMITS                                                                                                                                                                                                                          |
|---------|---------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------|--------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A       | COMMERCIAL GENERAL LIABILITY<br>CLAIMS-MADE <input type="checkbox"/> OCCUR <input type="checkbox"/><br>Deductible \$5,000 |                 |                            |                                | EACH OCCURRENCE<br>DAMAGE TO RENTED PREMISES (EA OCCURRENCE)<br>MED EXP (Any one person)<br>PERSONAL & ADV INJURY<br>GENERAL AGGREGATE<br>PRODUCTS - COMP/OP AGG<br>EMPLOYEES BENEFITS (EA OCCURRENCE)<br>COMBINED SINGLE LIMIT |
| B       | ANY AUTO<br>OWNED<br>AUTOS ONLY<br>HIRE<br>AUTOS ONLY                                                                     |                 |                            |                                | BOOKLY INJURY (Per person)<br>BOOKLY INJURY (Per accident)<br>PROPERTY DAMAGE<br>E.L. DISEASE - EA EMPLOYEE<br>E.L. DISEASE - POLICY LIMIT                                                                                      |
| A       | UMBRELLA LIAB<br>EXCESS LIAB<br>CLAIMS-MADE <input type="checkbox"/> N/A                                                  | WC 16-24-989-03 | 12/31/2024                 | 12/31/2025                     | EACH OCCURRENCE<br>AGGREGATE                                                                                                                                                                                                    |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Coverage is provided for New Era Skilled Roofing 600 N Jefferson Street Suite G Placentia, CA 92670 only those co-employees of, but not subcontractors to:

### CERTIFICATE HOLDER

Contractors State License Board  
9621 Business Park Drive  
Sacramento, CA 95827

### CANCELLATION

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

Jacki Lange

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OFFICERS:

**RICARDO MENCHACA, CEO**

**OZZY PLASCENCIA, COO**

**EIN : 863481959**

**LICENSE : 1078129 (B, C39)**

**EMR RATING : .86**

**BONDING CAPACTIY : \$500,000.00**

UNMARKED TRUCKS AVAILABLE  
FOR SUB WORK

COMPANY SAFETY PROGRAM  
AND IIPP AVAILABLE UPON  
REQUEST

