

CERTIFICATE OF INSURANCE NON-TRUCKING LIABILITY

Named Insured:

Insurance Company:
Redpoint County Mutual Insurance
Company
Home Office:
13215 Bee Cave Pkwy.,
Blg B, Ste 150
Austin TX 78738

Producing Agent:

**TEXAS DEPT. OF INSURANCE
AUSTIN, TEXAS
APPROVED**

03/11/2021

THIS CERTIFICATE IS ISSUED FOR INFORMATIONAL PURPOSES ONLY.
THE INSURANCE COVERAGE PROVIDED UNDER THIS CERTIFICATE IS SUBJECT TO ALL TERMS, CONDITIONS, AND EXCLUSIONS OF THE POLICIES IDENTIFIED BELOW.

TYPE OF INSURANCE	INSURANCE COMPANY POLICY NUMBER	POLICY TERM	COVERAGE
Non-Trucking Liability		Eff. Exp	\$ BODILY INJURY AND PROPERTY DAMAGE LIABILITY CSL / Occurrence
Commercial Excess Liability		Eff. Exp	\$ CSL / Occurrence

COVERAGE IS AFFORDED TO THE FOLLOWING DESCRIBED VEHICLE(S):

FLEET #: UNIT #: YEAR: MAKE: SERIAL / VIN #: TRACTOR REGISTERED:	
---	--

CERTIFICATE HOLDER

LESSEE
MOTOR
CARRIER
NAME
AND
ADDRESS

AUTHORIZED REPRESENTATIVE

IMPORTANT – PLEASE READ BELOW

1. THIS **CERTIFICATE OF INSURANCE** IS ISSUED BASED ON A WARRANTY BY THE **NAMED INSURED** THAT THE **COVERED AUTO** PERMANENTLY LEASED TO THE **LESSEE MOTOR CARRIER** IDENTIFIED ABOVE. ALL COVERAGE EXPIRES IF THE LEASE HAS BEEN CANCELLED OR TERMINATED BY EITHER THE **NAMED INSURED** OR THE **LESSEE MOTOR CARRIER**. THIS **CERTIFICATE OF INSURANCE** DOES NOT AMEND, EXTEND OR ALTER ANY COVERAGE AFFORDED BY THE POLICIES.
2. **CLAIMS REPORTING:** REPORT ALL NON-TRUCKING LIABILITY **ACCIDENTS** IMMEDIATELY TO THE **LESSEE MOTOR CARRIER**, AND THEN TO HUDSON INSURANCE COMPANY CLAIMS AT 1-844-338-5001.
3. THE **NAMED INSURED** OR THE **LESSEE MOTOR CARRIER** MAY TERMINATE THIS **CERTIFICATE OF INSURANCE** BY ADVISING THE PRODUCING AGENT IN ADVANCE OF THE DESIRED DATE OF TERMINATION.

QUESTIONS OR PROBLEMS CONCERNING THIS CERTIFICATE SHOULD BE DIRECTED TO THE PRODUCING AGENT