118387

CERTIFICATE OF LIABILITY INSURANCE

Date:

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. 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 policy holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to 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).

AGENT:

PRODUCER:

INSURED

INSURER A:

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	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY						GENERAL AGGREGATE	
	☐ CLAIMS MADE ☐ OCCUR						PRODUCTS COMP/OP AGGREGATE	
		☐	☐				PERSONAL & ADV INJURY	
							EACH OCCURENCE	
	GEN'L AGGREGATE LIMIT APPLIES PER:						FIRE DAMAGE (Any one fire)	
	☐ POLICY ☐ PROJECT ☐ LOC						MED EXP (Any one person)	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT	
	☐ ANY AUTO						BODILY INJURY- PER PERSON	
	☐ ALL OWNED AUTOS ☐ SCHEDULED AUTOS	☐	☐				BODILY INJURY - PER ACCIDENT	
	☐ HIRED AUTOS ☐ NON-OWNED AUTOS						PROPERTY DAMAGE	
	GARAGE LIABILITY						AUTO ONLY - EA ACCIDENT	
	☐ ANY AUTO	☐	☐				OTHER THAN AUTO ONLY EACH ACCIDENT	
							AGGREGATE	
	☐ UMBRELLA LIAB ☐ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE	☐	☐				EACH OCCURRENCE	
	☐ DEDUCTIBLE ☐ RETENTION $						AGGREGATE	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	☐	☐				STATUTORY LIMITS	
							EACH ACCIDENT	
	ANY PROPRIETOR/ PARTNERS/ EXECUTIVE OFFICERS/MEMBER Y/N ☐						DISEASE - EACH EMPLOYEE	
							DISEASE - POLICY LIMIT	
	OTHER	☐	☐					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / SPECIAL ITEMS

TEXAS DEPT. OF INSURANCE
AUSTIN, TEXAS
APPROVED
FEB 2 1 2012

CERTIFICATE HOLDER

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

TAR COI 1.0 1/12