

5649110

LOSS PAYEE / ADDITIONAL INSURED'S CONTINUOUS CERTIFICATE OF INSURANCE

**TEXAS DEPT. OF INSURANCE
AUSTIN, TEXAS
APPROVED
FEB 27 2018**

NAME AND ADDRESS OF ADDITIONAL INTEREST

NAMED INSURED

THIS IS TO CERTIFY THAT THE POLICY OF INSURANCE LISTED BELOW HAS BEEN ISSUED TO THE ABOVE NAMED INSURED FOR THE POLICY PERIOD INDICATED. THE INSURANCE AFFORDED BY THE POLICY DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICY, REGARDLESS OF ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT TO WHICH THIS CERTIFICATE MAY PERTAIN.

TYPE OF ADDITIONAL INTEREST:

- Loss Payee (Loss Payable Clause)**
- Lessor - Additional Insured and Loss Payee**
- Designated Insured**

AGENCY			AGENCY NO.	POLICY NUMBER	POLICY PERIOD 12:01 A.M. STANDARD TIME AT THE ADDRESS OF THE NAMED INSURED AS STATED ABOVE.	
TO CONTINUOUS						
YEAR	MAKE	VEHICLE IDENTIFICATION NUMBER	LIABILITY		COMP. DEDUCTIBLE	COLL. DEDUCTIBLE

If you have any questions concerning this policy, please contact the agent of record listed below:

IMPORTANT NOTICE: THIS CERTIFICATE OF INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY. IT CONFERS NO RIGHTS UPON THE THIRD PARTY REQUESTING THE CERTIFICATE BEYOND WHAT THE REFERENCED POLICY OF INSURANCE EXPRESSLY PROVIDES. THIS CERTIFICATE OF INSURANCE DOES NOT EXTEND, AMEND, OR ALTER THE COVERAGE, TERMS, EXCLUSIONS, OR CONDITIONS AFFORDED BY THE POLICY REFERENCED IN THIS CERTIFICATE OF INSURANCE.

CANCELLATION: SHOULD THE ABOVE DESCRIBED POLICY BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ORIGINAL POLICY OR RENEWAL CERTIFICATE HELD BY NAMED INSURED.

AUTHORIZED REPRESENTATIVE