## 120590

## CERTIFICATE OF INSURANCE FOR CLOSURE AND/OR POST-CLOSURE CARE

## For Information Purposes Only

Name and Address of Insurer (herein called the "Insurer"):

Greenwich Insurance Company Seaview House, 70 Seaview Avenue Stamford, CT 06902-6040

Name and Address of Insured (herein called the "Insured"):

FACILITY COVERED:

EPA IDENTIFICATION NUMBER:

SWR REGISTRATION NO:

PERMIT NO:

Closure Limit:

Post-Closure Limit:

Compliance Plan:

FACE AMOUNT:

POLICY NUMBER:

EFFECTIVE DATE:

The Insurer hereby certifies that it has issued to the Insured the policy of insurance identified above to provide financial assurance for closure for the facility identified above.

Whenever requested by the Executive Director of the Texas Natural Resource Conservation Commission ("TNRCC"), the Insurer agrees to furnish to the TNRCC, Executive Director a duplicate original of the policy listed above, including all endorsements thereon.

TEXAS DEPARTMENT OF INSURANCE AUSTIN, TEXAS

JUN 22 2012

## 120590

(Signature of Authorized Representative of Insu	Date:	
(Signature of Authorized Representative of Inst	ner)	
	Authorized Representative of	Greenwich Insurance Company
(Witness of Notary Signature)	Date:	

SEAL

TEXAS DEPARTMENT OF INSURANCE AUSTIN, TEXAS APPROVED JUN 22 2012