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**TEXAS DEPARTMENT OF LICENSING & REGULATION**

P.O. Box 12157 • Austin, Texas 78711-2157

[www.tdlr.texas.gov](http://www.tdlr.texas.gov)

**MOTOR FUEL METERING AND QUALITY CERTIFICATE OF INSURANCE**

This certificate is issued to the Texas Department of Licensing and Regulation as a matter of information only and confers no rights upon the certificate holder. This Certificate of Insurance does not affirmatively or negatively amend, extend or alter the coverage afforded by the policy specified herein.

This certificate is used only to indicate general liability insurance coverage. This document is intended to prove the existence of active general liability insurance coverage for the licensee, as required by the Texas Department of Agriculture Rule, 4 TAC §12.42.

Business Name: \_\_\_\_\_ Business dba: \_\_\_\_\_

Business Physical Location: \_\_\_\_\_  
Number, Street Name, Suite Number City State Zip Code

Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_  
Binders or declarations are not accepted

Term Dates: \_\_\_\_\_ to \_\_\_\_\_ Amount of Coverage: \_\_\_\_\_  
Effective (mm/day/year) Expiration (mm/day/year) Minimum Required \$50,000.00

Name of Insurance Agency: \_\_\_\_\_ Name of Agent: \_\_\_\_\_

Insurance Agency Address: \_\_\_\_\_  
Number, Street Name, Suite Number City State Zip Code

Agent Phone Number: \_\_\_\_\_  
(Area Code) Phone Number

I certify that this insurance company is licensed to do business by the Texas Department of Insurance or is an Eligible Surplus Lines Carrier. I further certify that this policy meets the minimum requirements for a Service Company License, with aggregate amounts no less than the minimum class amount of \$50,000.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

**CERTIFICATE HOLDER ADDRESS:**

Texas Department of Licensing and Regulation  
P.O. Box 12157  
Austin, TX 78711-2871  
Phone: (512) 463-6599 • Fax: (512) 475-2871  
[www.tdlr.texas.gov](http://www.tdlr.texas.gov)

**TEXAS DEPARTMENT OF INSURANCE  
AUSTIN, TEXAS  
APPROVED**

**JAN 20 2020**