

CHARTIS AEROSPACE INSURANCE SERVICES, INC.

119075

CERTIFICATE OF COMMERCIAL LIABILITY INSURANCE - TEXAS

This certificate is issued for informational purposes only. It certifies that the policies listed in this document have been issued to the Named Insured. It does not grant any rights to any party nor can it be used, in any way, to modify coverage provided by such policies. alteration of this certificate does not change the terms, exclusions or conditions of such policies. Coverage is subject to the provisions of the policies, including any exclusions or conditions, regardless of the provisions of any other contract, such as between the certificate holder and the Named Insured. The limits shown below are the limits provided at the policy inception. Subsequent paid claims may reduce these limits.

Producer:	Named Insured:

General Liability		
Insurer Name:		
Policy Number:		
Policy Effective Date:		Policy Expiration Date:
Limits of Insurance	\$	Each Occurrence Limit
	\$	Damage To Premises Rented To You Limit (any one premises)
	\$	Medical Expense Limit (any one person)
	\$	Personal & Advertising Injury Aggregate Limit
	\$	General Aggregate Limit
	\$	Products/Completed Operations Aggregate Limit
		Hangarkeepers Limit
	\$	Each Aircraft Limit
	\$	Each Loss Limit
	\$	Hangarkeepers Deductible (each aircraft)
General Aggregate Limit applies per:		<input type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> Location

Description of Operations/Locations/Endorsements/Special Provisions
<div style="text-align:right; font-weight:bold; font-size:1.2em;"> TEXAS DEPT. OF INSURANCE AUSTIN, TEXAS APPROVED APR - 2 2012 </div>

Additional Insured Status
THIS CERTIFICATE DOES NOT GRANT ANY COVERAGE OR RIGHTS TO THE CERTIFICATE HOLDER. IF THIS CERTIFICATE INDICATES THAT THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED, THE POLICY(IES) MUST EITHER BE ENDORSED OR CONTAIN SPECIFIC LANGUAGE PROVIDING THE CERTIFICATE HOLDER WITH ADDITIONAL INSURED STATUS. THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED ONLY TO THE EXTENT INDICATED IN SUCH POLICY LANGUAGE OR ENDORSEMENT.

Cancellation
In the event of cancellation of any policy described above, the insurer will attempt to mail _____ days written notice to the certificate holder prior to the effective date of cancellation.

Certificate Holder:	Certificate No. _____
Authorized Representative:	
Date of Issue _____	