

Certificate of Insurance

Policy No.	Eff. Date of Pol.	Exp. Date of Pol.	Premium
XXXXXXXXXX	XX/XX/2023	XX/XX/2024	\$XXXX.XX

Named Insured and Mailing Address:

Name of Insurer:

CERTIFICATION:

1. XXX Insurance Company, the 'Insurer', as identified above, hereby certifies that it has issued liability insurance covering the following underground storage tank(s):

Per Attached Scheduled Locations and Scheduled Storage Tank(s) Systems

for taking corrective action and compensating third parties for bodily injury and property damage caused by accidental releases; in accordance with and subject to the limits of liability, exclusions, conditions, and other terms of the policy; arising from operating the underground storage tank(s) identified above.

The limits of liability are: \$1,000,000 Each Occurrence and: \$1,000,000 Annual Aggregate Policy Limit, exclusive of legal defense costs which are subject to a separate limit under the Policy. This coverage is provided under Policy Number: XXX. The effective date of said policy is: XX/XX/2023.

2. The Insurer further certifies the following with respect to the insurance described in Paragraph 1:
 - a. Bankruptcy or insolvency of the Insured shall not relieve the Insurer of its obligations under the policy to which this certificate applies.
 - b. The Insurer is liable for the payment of amounts within any deductible applicable to the policy to the provider of corrective action or a damaged third party, with a right of reimbursement by the insured for any such payment made by the Insurer. This provision does not apply with respect to that amount of any deductible for which coverage is demonstrated under another mechanism or combination of mechanisms as specified in 40 CFR 280.95-280.102 and 280.104-280.107.
 - c. Whenever requested by a Director of an implementing agency, the Insurer agrees to furnish to the Director a signed duplicate original of the Policy and all endorsements.
 - d. Cancellation or any other termination of the insurance by the Insurer, except for non-payment of premium or misrepresentation by the insured, will be effective only upon written notice and only after the expiration of 60 days after a copy of such written notice is received by the Insured. Cancellation for non-payment of premium or misrepresentation by the Insured will be effective only upon written notice and only after expiration of a minimum of 10 days after a copy of such written notice is received by the Insured.
 - e. The insurance covers claims otherwise covered by the Policy that are reported to the Insurer within six (6) months of the effective date of cancellation or non-renewal of the Policy except where the new or renewed policy has the same retroactive date or a retroactive date earlier than that of the prior policy and which arise out of any covered occurrence that commenced after the policy retroactive date, if applicable, and prior to such policy renewal or termination date. Claims reported during such an extended reporting period are subject to the terms, conditions, limits, including limits of liability, and exclusions of the policy.

I hereby certify that the wording of this instrument is identical to the wording in 40 CFR 280.97 (b) (2) and that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess lines insurer, in one or more states.

Signature Required

Name, Title

Authorized representative of XXX Insurance Company

Example - Do Not Fill Out

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

COVERED STORAGE TANK AND LOCATION ENDORSEMENT

This Endorsement shall not serve to increase our limits of insurance, as described in **SECTION V - LIMITS OF INSURANCE**.

In consideration of the payment of premiums, it is hereby agreed that the following are added to the policy as "scheduled storage tank system(s)":

Covered Storage Tank Systems							
Tank#	Insured Site	Type UST/AST	Install Date	Capacity (Gallons)	Contents	Deductible	Retro Date
1a	Location #1 Address:	UST	1996	10,000	Gasoline	\$XX	XX/XX/2013
1b	Location #1 Address:	UST	1996	8,000	Gasoline	\$XX	XX/XX/2013
2	Location #1 Address:	UST	2018	4,000	Diesel	\$XX	XX/XX/2018
1	Location #2 Address:	UST	1997	16,000	Gasoline	\$XX	XX/XX/2015
2	Location #2 Address:	UST	1997	16,000	Gasoline	\$XX	XX/XX/2015
3	Location #2 Address:	UST	1997	12,000	Diesel	\$XX	XX/XX/2015

All other terms, conditions and exclusions under the policy are applicable to this Endorsement and remain unchanged.