

CERTIFICATE OF MARINE / ENERGY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to

		erms and conditions of the policy icate holder in lieu of such endors				ndorse	ment. A state	ement on th	is c	ertificate does not c	onfer r	ights to the	
PROI	DUCE	ER				CONTA NAME:	СТ						
						PHONE (A/C, No				FAX (A/C, No):			
						E-MAIL ADDRE	SS:			(A/C, NO).			
						PRODUCER CUSTOMER ID #:							
						INSURER(S) AFFORDING COVERAGE						NAIC #	
INSU	RED					INSURER A:							
						INSURE	R B :						
						INSURE							
							INSURER D:						
							INSURER E:						
COVERAGES CERTIFICATE NUMBER:							INSURER F:						
						REVISION NUMBER: AVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERI						ICY PERIOD	
IN CE E)	DIC.	ATED. NOTWITHSTANDING ANY RE IFICATE MAY BE ISSUED OR MAY USIONS AND CONDITIONS OF SUCH	EQUIF PERT POLI	REMEI AIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF AN' ED BY	Y CONTRACT THE POLICIES REDUCED BY F	OR OTHER DESCRIBED PAID CLAIMS.	OOC	UMENT WITH RESPE	CT TO	WHICH THIS	
INSR LTR		TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMIT	LIMITS		
	HU	LL AND MACHINERY								PER SCHEDULE ON FILE			
		1								INSURED VALUE	\$		
		COLLISION LIABILITY								LISION (Ea occurrence)	\$		
		TOWERS LIABILITY							TOV	VERS (Ea occurrence)	\$		
											\$		
	PR	OTECTION AND INDEMNITY								PER CLUB RULES			
		CREW LIABILITY JONES ACT							CO!	EA OCCURRENCE PER VESSEL, CSL	\$		
		COLLISION LIABILITY TOWERS LIABILITY								LISION (Ea occ), CSL VERS (Ea occ), CSL	\$		
		REMOVAL OF WRECK								MOVAL OF WRECK	\$		
		IN REM							(Ea	occurrence)	\$		
		IN KEW									\$		
											\$		
	РО	LLUTION LIABILITY							EA	OCCURRENCE	\$		
		OPA 90									\$		
		CERCLA									\$		
		NON-OPA / NON-CERCLA									\$		
											\$		
	MA	RITIME EMPLOYERS LIABILITY							ANY	ONE PERSON	\$		
		ALTERNATE EMPLOYER							ANY	ONE ACCIDENT	\$		
	INC	CREW EMPS									\$		
		JONES ACT	N/A								\$		
		DEATH ON THE HIGH SEAS									\$		
		IN REM ENDORSEMENT									\$		
											\$		
											\$		
											\$		
											\$		
CERTIFICATE HOLDER						CANCELLATION SHOULD ANY OF THE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE							

COVERAGES

CERTIFICATE NUMBER:

INSR LTR	TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
	COMMERCIAL GENERAL LIABILITY	INOD	****	. 0201	(11111700711117	(MINUS D) 1 1 1 1)	EACH OCCURRENCE	\$		
	MARINE GENERAL LIABILITY						DAMAGE TO RENTED	\$		
	CLAIMS-MADE OCCUR						PREMISES (Ea occurrence) MED EXP (Any one person)			
	OCCUR.					-		\$		
							PERSONAL & ADV INJURY	\$		
							GENERAL AGGREGATE	\$		
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS-COMP / OP AGG	\$		
	POLICY PRO- JECT LOC							\$		
	OTHER:							\$		
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO SCHEDULED AUTOS						BODILY INJURY (Per person)	\$		
	ALL OWNED NON-OWNED AUTOS						BODILY INJURY (Per accident)	\$		
	HIRED AUTOS						PROPERTY DAMAGE (Per accident)	\$		
	WORKERS COMPENSATION						☐ PER ☐ OTH-	•		
	AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE						E.L. (Each accident)	.		
	OFFICER/MEMBER EXCLUDED?						E.L. DISEASE (Ea employee)	\$		
	(Mandatory in NH) If yes, describe under DESCRIPTION					-		\$		
	OF OPERATIONS below	N/A					E.L. DISEASE - POLICY LIMIT	\$		
	ALTERNATE EMPLOYER							\$		
	USL&H ENDORSEMENT							\$		
	MARITIME EMPLOYERS LIABILITY							\$		
	OCSL ACT							\$		
	U.S. LONGSHORE & HARBOR WORKERS COMPENSATION ACT						□ PER □ OTH- STATUTE □ ER			
	ALTERNATE EMPLOYER						E.L. (Each accident)	\$		
	MARITIME EMPLOYERS LIABILITY	N/A					E.L. DISEASE (Ea employee)	\$		
	OCSL ACT						E.L. DISEASE - ANN AGG	\$		
								\$		
	AIRCRAFT LIABILITY						EACH OCCURRENCE	\$		
l	OWNED AIRCRAFT						AGGREGATE			
	NON-OWNED AIRCRAFT					-	AGOREGATE	\$		
								\$		
	PASSENGER LIABILITY							\$		
\vdash								\$		
	UMBRELLA / EXCESS LIAB / BUMBERSHOOT						EACH OCCURRENCE	\$		
	UMBRELLA BUMBERSHOOT						AGGREGATE	\$		
	EXCESS							\$		
	CLAIMS MADE OCCUR							\$		
	DED RETENTION \$							\$		
	ENERGY						CSL, ANY ONE OCCURRENCE	\$		
	CONTROL OF WELL / OPERATORS EXTRA EXPENSE						(100% interest)	4		
	CARE, CUSTODY AND CONTROL (CCC)						ANY ONE OCCURRENCE (100% interest)	\$		
	OFFSHORE OIL AND GAS PROPERTY						,			
	PLATFORMS						VALUES AS SCHEDULED	\$		
	PIPELINES						VALUES AS SCHEDULED	\$		
										
								\$		
	ONCHORE OIL AND CAS PROPERTY							\$		
	ONSHORE OIL AND GAS PROPERTY						\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
	OIL & GAS PROPERTY						VALUES AS SCHEDULED	\$		
	CONTRACTORS EQUIPMENT						VALUES AS SCHEDULED	\$		
								\$		
	NAMED WINDSTORM									
L l	CCC OFF- SHORE ON- SHORE						AGGREGATE	\$		
VES	SEL(S): AS PER ATTACHED S	CHE	DULE	AS DETAILED IN THE	DESCRIPTIO	N OF OPERAT	TIONS			
DESC	RIPTION OF OPERATIONS / LOCATIONS (ACOR	D 101,	Additio	onal Remarks Schedule, may be attached, i	f more space is r	equired)				