

# Florida Department of Environmental Protection

Bob Martinez Center 2600 Blairstone Road Tallahassee, Florida 32399-2400 Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

February 13, 2009

Marvin Sparks Ecoflo, Inc 2750 Patterson St Greensboro, NC 27407-2317

Re: Florida Hazardous Waste Transporter Approval

Dear Marvin Sparks:

Your Florida Hazardous Waste Transporter Approval Certificate is enclosed. The terms and conditions of approval are specified in Sections 62-730.170 and 62-730.171, Florida Administrative Code(FAC), a copy of which is enclosed for your reference. Please note the following.

- You must demonstrate proof of liability coverage on an annual basis, even if your insurance policy is issued on a multi-year basis. If no changes in status or insurance coverage have occured, you can meet this requirement by submitting a certificate of liability coverage form along with the two copies of the Hazardous Waste Transporter Status Form, copies of which are available upon request from the Department of Environmental Protection.
- 2. A copy of your insurance policy, together with any endorsements, must be maintained at your principal place of business.
- 3. Your insurer can not terminate your coverage until 30 days after filing written notice with DEP, by Certified mail, that your policy has expired or has been canceled.
- 4. Any changes to the information specified on your approval certificate will render it null and void. It is your responsibility to advise DEP of any changes in liability coverage or status.
- 5. A copy of Hazardous Waste Transporter Status Form, complete with the Department approval shall be carried in each vehicle transporting hazardous waste for the transportation company.

Marvin Sparks February 13, 2009 Page Two

If you intend to operate a hazardous waste transfer facility, you must submit a Transfer Facility Form [Form 62-730.900(6)]. Notification also must include a contingency and emergency plan and a facility closure plan in accordance with Rule 62-730.171(3)(a), F.A.C. The owner or operator must also demonstrate to the satisfaction of the Department that the location complies with the relevant sitting requirements listed in section 403.7211(2) Florida Statues (F.S) before the location is used as a transfer facility.

If you are currently operating an authorized transfer facility, you must maintain records of incoming and outgoing hazardous waste shipments. These records must include generator names and manifest numbers, and, unless otherwise approved by the Department, must be maintained at the transfer facility in accordance with Rule 62-730.171(6), F.A.C.

If you have any questions, please contact me at 850/245-8755.

Sincerely,

**Richard Neves** 

Hazardous Waste Management Section

Buhwel Offers

RN

Enclosures: Hazardous Waste Transporter Approval Certificate

Hazardous Waste Transporter Status Form (with insurance verification)

Sections 62-730.170 and 62-730.171, FAC



## Florida Department of Environmental Protection

Bob Martinez Center 2600 Blairstone Road Tallahassee, Florida 32399-2400 Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

### HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF APPROVAL

\*\*\*\*\*\*\*\*\*\*\*

This is to certify that the carrier specified below has been approved as a hazardous waste transporter in Florida. The terms and conditions of this certificate require that the holder comply with all applicable portions of Chapter 62-730, Florida Administrative Code. This certificate shall be rendered null and void if any information contained within becomes obsolete. The certificate shall remain valid through the expiration date specified below.

TRANSPORTER: Ecoflo, Inc

FACILITY ID NO: NCD980842132

FACILITY ADDRESS: 2750 PATTERSON STREET

GREENSBORO, NC 27407

INSURANCE CARRIER: GREENWICH INSURANCE

INSURANCE POLICY#: UEC000514909

EFFECTIVE DATE: December 31, 2008

EXPIRATION DATE: December 31, 2009

APPROVED TRANSFER FACILITY: NO

APPROVAL ISSUED BY: \_\_\_\_\_\_ DATE: February 13, 2009

**Richard Neves** 

Hazardous Waste Management Section

850/245-8755

JAN 12 2009

#### STATE OF FLORIDA

#### HAZARDOUS WASTE TRANSPORTER STATUS FORM

3.7			1	· 5	
11/10		h,	14.7	1.5	
د ۱ زیر	2		'		-24

1. Transporter Identification:
Transporter Name: ECOFLO, Inc.
Transporter EPA ID: NCD 480 842 132
Location Address: 2750 Patterson Street Greensboro, NC 27407
Contact: Marvin R. Sporks, Jr. Telephone: (336)855-7925 (E-mail: rsparks @ ecoflo.co. Mailing Address: 2750 Patterson Street
Greensboro, NC 27407
II. Insurance Information: Greenwich Insurance Company  Address Side Wilder Address Si
Address <u>seaview House, 70 Seaview Avenue</u> Stamford, CT 06902-6040
Contact: Ms. Vicki Emala Telephone: (410) 527-7232
Policy Number: <u>UECOOS14909</u> Expiration date: <u>12-31-09</u>
III. <u>Waste Information</u> :
EPA Waste Codes for Waste Routinely or Usually Transported:
Comments: MOST ALL OF THE EPA CODES
IV. <u>Certification</u> :
I certify under penalty of law that the above information is true, correct, and complete to the best of my knowledge.
Marvin R. Sparks, Jr. Manager of Compliance & Safety Print/Type Name 72
12-23-08
Signature Date Signed
***************************************
V. The transporter identified above is in compliance with the financial responsibility requirements for hazardous waste transporters pursuant to Chapter 62-730.170, Florida Administrative Code. The forms submitted by the transporter show compliance with the financial responsibility through 12/31/2009.

APPROVED by Tiffaney A. Noland, changes approved by the Certifier by phone 1/28/2009

Signature of Florida Department of Environmental Protection Representative Date Signed

DEP Form 62-730.900(5)(d) Effective 1/5/95

HW Transporter Status Form Page 1 of 1

ACC	ORD, CERTIFICAT	E OF LIABILI	TY INSURANCE Page 1 of 3	DATE 12/24/2008
PRODUCER	Willis HRH 26 Century Blvd.	877-945-7378	THIS CERTIFICATE IS ISSUED AS A MATTER OF ONLY AND CONFERS NO RIGHTS UPON THE HOLDER. THIS CERTIFICATE DOES NOT AMEND ALTER THE COVERAGE AFFORDED BY THE POL	CERTIFICATE O, EXTEND OR
	P. O. Box 305191 Nashville, TN 372305191		INSURERS AFFORDING COVERAGE	NAIC#
INSURED ECOFLO, Inc.			INSURER A: Greenwich Insurance Company	22322-001
	2750 Patterson Street Greensboro, NC 27407		INSURER B: XL Insurance America, Inc.	24554-001
	,,,,,,,,,,,,		INSURER C: XL Specialty Insurance Company	37885-001
			INSURER D:	
	1		INSURER E:	1

#### COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD' LTR INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS		
A	GENERAL LIABILITY  X COMMERCIAL GENERAL LIABILITY  CLAIMS MADE X OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- X LOC	GEC000514409	12/31/2008	12/31/2009	EACH OCCURRENCE         \$ 1,000,00           DAMAGE TO RENTED PREMISES (Ea occurrence)         \$ 100,00           MED EXP (Any one person)         \$ 5,00           PERSONAL & ADV INJURY         \$ 1,000,00           GENERAL AGGREGATE         \$ 2,000,00           PRODUCTS - COMP/OP AGG         \$ 2,000,00		
В .	AUTOMOBILE LIABILITY  X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS	AEC000514509	12/31/2008	12/31/2009	COMBINED SINGLE LIMIT (Ea accident)  BODILY INJURY (Per person)  BODILY INJURY (Per accident)  \$  PROPERTY DAMAGE (Per accident)  \$		
	GARAGE LIABILITY  ANY AUTO				AUTO ONLY - EA ACCIDENT \$  OTHER THAN AUTO ONLY: AGG \$		
A	EXCESS/UMBRELLA LIABILITY  X OCCUR CLAIMS MADE  DEDUCTIBLE X RETENTION \$ 10,000	UEC000514909	12/31/2008	12/31/2009	EACH OCCURRENCE \$ 8,000,00  AGGREGATE \$ 8,000,00  \$ \$ \$ \$		
ANY OFF If ye SPE	RKERS COMPENSATION AND PLOYERS' LIABILITY  PROPRIETOR/PARTNER/EXECUTIVE ICER/MEMBER EXCLUDED?  s. describe under COLAL PROVISIONS below	WEC000515009	12/31/2008		WC STATU-   OTH-		
En	HER  DESULTANTS  VITONMENTAL LIABILITY  TON OF OPERATIONS//OCATIONS//EHICLE	PEC000514608		12/31/2009	\$1,000,000 Each Claim including Defense costs \$2,000,000 Aggregate \$25,000 Retention Ea Claim		

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

ee Attached for Pollution and Remediation Liability

OCOTIC!	CATE	1101	DED
CERTIFI	VAIE	HOL	.VER

#### **CANCELLATION**

DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN
NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL
IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR
REPRESENTATIVES.

Hazardous Waste Mangement Section
MS 4555
2600 Blair Stone Road
Tallahassee, FL 32399-2400

AUTHORIZED REPRESENTATIVE

Coll:2571723 Tpl:872196 Cert:11943364

© ACORD CORPORATION 1988

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION

Willi	S CERTIFICATE OF LIABI	LITY INSURANCE Page 2 of 3	DATE 12/24/2008
PRODUCER 877-945-737 Willis HRH 26 Century Blvd.		THIS CERTIFICATE IS ISSUED AS A MATTER O ONLY AND CONFERS NO RIGHTS UPON TH HOLDER. THIS CERTIFICATE DOES NOT AME! ALTER THE COVERAGE AFFORDED BY THE PO	E CERTIFICATE ND, EXTEND OR
	P. O. Box 305191 Nashville, TN 372305191	INSURERS AFFORDING COVERAGE	NAIC#
INSURED	ECOFLO, Inc.	INSURERA: Greenwich Insurance Company	22322-001
	2750 Patterson Street Greensboro, NC 27407	INSURERB: XL Insurance America, Inc.	24554-001
	or demonstration and array	INSURERC: XL Specialty Insurance Company	37885-001
		INSURER D:	
		INSURER E:	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

Pollution/Remediation Liability Policy No. PEC000514703 Issuing Carrier: Indian Harbor Insurance Company - 36940-200

12/31/2008 - 12/31/2011

The following applies at Owned Disposal Sites: \$5,000,000 Each Pollution Condition \$10,000,000 Aggregate \$50,000 Self- Insured Retention - Each Pollution Condition

Sublimit of Liability At Non-Owned Disposal Sites: \$1,000,000 Each Pollution Condition \$1,000,000 Aggregate \$50,000 Self-Insured Retention - Each Pollution Condition

Evidence of Coverage

Page 3 of 3

#### **IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

#### **DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.



## ENDORSEMENT FOR MOTOR CARRIER POLICIES OF INSURANCE FOR PUBLIC LIABILITY UNDER SECTIONS 29 AND 30 OF THE MOTOR CARRIER ACT OF 1980

FORM APPROVED OMB No.: 2126-0008

Issued to Ecoflo Holding, Inc	of	Greesboro, N	IC		_
Dated at Seaview House, 70 Seaview Avenue S	tamford, CT 06902-6040 this	18th	day of	December 2008	
Amending Policy No. <u>UEC000514909</u>	Effec	tive Date 12	2/31/2008		_
Name of Insurance Company Greenwich Ins	urance Company				
	Countersigned by		authorized Compa	any Representative	-
The policy to which this endorsement is attached provides p	rimary or excess insurance, as indica	ited by "[X]," for th	ne limits shown:		
☐ This insurance is primary and the company sha	Ill not be liable for amounts in excess	of \$	for each accid	dent.	
	Il not be liable for amounts in excess o	of \$ 4,000,000	f	or each accident in excess of	the underlying
limit of \$ 1,000,000 for each accid	ent.				
Whenever required by the Federal Motor Carrier Safety Administration (FMCSA), the company agree		grees to furnish th	ne FMCSA a duplica	ate of said policy and all its en	dorsements. The
company also agrees, upon telephone request by an author	ized representative of the FMCSA, to	verify that the po	licy is in force as of	a particular date. The telepho	one number to call
is <u>1-800-327-1414</u> .				•	
Cancellation of this endorsement may be effected by the co	mpany of the insured by giving (1) this	rty-five (35) days	notice in writing to t	he other party (said 35 days n	otice to commence
from the date the notice is mailed, proof of mailing shall be	sufficient proof of notice), and (2) if the	e insured is subje	ct to the FMCSA's r	egistration requirements unde	r 49 U.S.C. 13901,
by providing thirty (30) days notice to the FMCSA (said 30 o	lays notice to commence from the dat	e the notice is red	ceived by the FMSC	A at its office in Washington,	D.C.).
	DEFINITIONS AS USED IN TH	IIS ENDORSEM	IENT		
Accident includes continuous or repeated exposure to con-	ditions or which results in Pro	perty Damage m	neans damage to or	loss of use of tangible proper	ty.
bodily injury, property damage, or environmental damage w				titution for the loss, damage, o	
				lental discharge, dispersal, re	
•	otor Vehicle means a land vehicle, machine, truck, tractor, trailer, or semitrailer into or upon the land, atmosphere, watercourse, or body of water, of any commodity				
propelled or drawn by mechanical power and used on a hig	pelled or drawn by mechanical power and used on a highway for transporting transported by a motor carrier. This shall include the cost of removal and the cost of				
property, or any combination thereof.				or mitigate damage to human	
Bodily Injury means injury to the body, sickness, or diseas	e to any person, including env	ironment, fish, sh	ellfish, and wildlife.		
death resulting from any of these.	Pul	b <i>lic Library</i> mear	ns liability for bodily	injury, property damage, and	environmental
	resi	toration.			

The insurance policy to which this endorsement is attached provides automobile liability insurance and is amended to assure compliance by the insured, within the limits stated herein, as a motor carrier of property, with Sections 29 and 30 of the Motor Carrier Act of 1980 and the rules and regulations of the Federal Motor Carrier Safety Administration (FMCSA). In consideration of the premium stated in the policy to which this endorsement is attached, the insurer (the company) agrees to pay, within the limits of liability described herein, any final judgment recovered against the insured for public liability resulting from negligence in the operation, maintenance or use of the motor vehicles subject to the financial responsibility requirements of Sections 29 and 30 of the Motor Carrier Act of 1980 regardless of whether or not each motor vehicle is specifically described in the policy and whether or not such negligence occurs on any route or in any territory authorized to be served by the insured or elsewhere. Such insurance as is afforded, for public liability, does not apply to injury to or death of the insured's employees while engaged in the course of their employment, or property transported by the insured, designated as cargo. It is understood and agreed that no condition, provision, stipulation, or limitation contained in the policy, this endorsement, or any other endorsement thereon, or violation thereof, shall relieve the company from liability or from the payment of any

condition, insolvency or bankruptcy of the insured. However, all terms, conditions, and limitations in the policy to which the endorsement is attached shall remain in full force and effect as binding between the insured and the company. The insured agrees to reimburse the company for any payment made by the company on account of any accident, claim, or suit involving a breach of the terms of the policy, and for any payment that the company would not have been obligated to make under the provisions of the policy except for the agreement contained in this endorsement.

It is further understood and agreed that, upon failure of the company to pay any final judgment recovered against the insured as provided herein, the judgment creditor may maintain an action in any court of competent jurisdiction against the company to compel such payment.

The limits of the company's liability for the amounts prescribed in this endorsement apply separately to each accident and any payment under the policy because of any one accident shall not operate to reduce the liability of the company for the payment of the final judgments resulting from any other accident.

THE SCHEDULE OF LIMITS SHOWN DOES NOT PROVIDE COVERAGE. The limits shown in the schedule are for information purposes only.

SCHEDULE OF LIMITS—PUBLIC LIABILITY

Type of carriage	Commodity transported	Jan. 1, 1985
(1) For-hire (In interstate or foreign commerce, with a gross vehicle weight rating of 10,000 or more pounds).	Property (nonhazardous)	\$ 750,000
(2) For-hire and Private (In interstate, foreign, or intrastate commerce, with a gross vehicle weight rating of 10,000 or more pounds).	Hazardous substances, as defined in 49 CFR 171.8, transported in cargo tanks, portable tanks, or hopper-type vehicles with capacities in excess of 3,500 water gallons; or in bulk Division 1.1, 1.2, and 1.3 materials, Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; in bulk Division 2.1 or 2.2; or highway route controlled quantities of a Class 7 material, as defined in 49 CFR 173.403	\$5,000,000
(3) For-hire and Private (In interstate or foreign commerce, in any quantity; or in intrastate commerce, in bulk only; with a gross vehicle weight rating of 10,000 or more pounds).	Oil listed in 49 CFR 172.101; hazardous waste, hazardous materials, and hazardous substances defined in 49 CFR 171.8 and listed in 49 CFR 172.101, but not mentioned in (2) above or (4) below.	\$1,000,000
(4) For-hire and Private (In interstate or foreign commerce, with a gross vehicle weight rating of less than 10,000 pounds).	Any quantity of Division 1.1, 1.2, or 1.3 material; any quantity of a Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material as defined in 49 CFR 173.403.	\$5,000,000

DEP Form # 17-730.900(5)(a)
Form Title: HWF Transporter Certificate of
Liability Insurance
Effective Date: 1-29-06
DEP Application #

## STATE OF FLORIDA HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF LIABILITY INSURANCE

 Greenwich Insurance Company (Name of Insurer)

(the "Insurer"), of Seaview House, 70 Seaview Avenue Stamford, CT 06902-6040 (Address of Insurer)

hereby certifies that it has issued liability insurance covering bodily injury and property damage including environmental restoration for sudden accidental occurrences to

ECOFLO Holding, Inc. (Name of Insured)

(the "Insured"), of 2750 Patterson St, Greensboro, NC 27407 (Address of Insured)

in connection with the insured's obligation to demonstrate financial responsibility under Florida Administrative Code Rule 62-730.170. The coverage applies at:

EPA/DEP I.D. No.

Name

Location

NCD980842132

ECOFLO Holding Inc. 2750 Patterson Street,

Greensboro, NC 27407

(If coverage is for multiple facilities, identify each facility insured.)

This insurance is excess and the company shall not be liable for amounts in excess of \$4,000,000 accident in excess of the underlying limit of \$1,000,000 for each accident, exclusive of legal defense costs. The coverage is provided under policy number UEC000514909, issued on 12/31/2008 The effective date of (date) said policy is 12/31/2008 and the expiration date of said policy is 12/31/2009.

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.

(date)

(b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer.

- (c) Whenever requested by the Secretary (or designee) of the Florida Department of Environmental Protection (FDEP), the Insurer agrees to furnish to the Department a signed duplicate original of the policy and all endorsements.
- (d) Cancellation of the insurance, whether by the Insurer or the Insured and any other termination of the insurance (e.g., expiration, non-renewal), will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Secretary of the FDEP as evidenced by certified mail return receipt.
- (e) The Insurer shall not be liable for the payment of any judgment or judgments against the Insured for claims resulting from accidents which occur after the termination of the insurance described herein, but such termination shall not affect the liability of the Insurer for the payment of any such judgment or judgments resulting from accidents which occur during the time the policy is in effect.

I hereby certify that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one of more States including Florida.

Siseph & Catarise
(Signature of Authorized Representative of Insurer)
Joseph Catanese
(Typed name)
Vice President
(Title)
Authorized Representative of
Greenwich Insurance Company
(Name of Insurer)
505 Eagleview Blvd Exton, PA 19341
(Address of Representative)

DEP Form # 17-730.900(5)(a)
Form Title: HWF Transporter Certificate of
Liability Insurance
Effective Date: 1-29-06
DEP Application #

### STATE OF FLORIDA TY

HA	ZARDOUS WASTE TRANSPORTER CERTIFICATE ( INSURANCE	OF LIABILIT
1.	XL Insurance America, Inc. (Name of Insurer)	
	(the "Insurer"), ofSeaview House, 70 Seaview Avenue Stamford, CT 06902-6040 (Address of Insurer)	
	hereby certifies that it has issued liability insurance covering bodily injury and proper environmental restoration for sudden accidental occurrences to	ty damage including
	ECOFLO Holding, Inc. (Name of Insured)	
	(the "Insured"), of 2750 Patterson St, Greensboro, NC 27407 (Address of Insured)	
	in connection with the insured's obligation to demonstrate financial responsibility und Administrative Code Rule 62-730.170. The coverage applies at:	ler Florida
	EPA/DEP I.D. No. Name Location NCD980842132 ECOFLO Holding Inc. 2750 Patterson Street, Greensboro, NC 27407	
	(If coverage is for multiple facilities, identify each facility insured.)	
	This insurance is <u>primary</u> and the company shall not be liable for amounts in excess of \$1,000,000 for each accident, exclusive of legal defense costs. The coverage is proviunder policy number AEC000514509, issued on 12/31/2008.	
	The effective date of said policy is 12/31/2008 and the expiration date of said policy	
	is 12/31/2009. (date)	
·	This insurance is excess and the company shall not be liable for amounts in excess of \$for each accident in excess of the underlying limit of \$for each accident, exclusive of legal defense costs. The coverage is provided under policy number_, issued onThe effective date of (date)	
	said policy isand the expiration date of said policy is	(1)
	(date)	(date)
^	COLUMN CO	

- 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 (a) policy.

- (b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer.
- (c) Whenever requested by the Secretary (or designee) of the Florida Department of Environmental Protection (FDEP), the Insurer agrees to furnish to the Department a signed duplicate original of the policy and all endorsements.
- (d) Cancellation of the insurance, whether by the Insurer or the Insured and any other termination of the insurance (e.g., expiration, non-renewal), will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Secretary of the FDEP as evidenced by certified mail return receipt.
- (e) The Insurer shall not be liable for the payment of any judgment or judgments against the Insured for claims resulting from accidents which occur after the termination of the insurance described herein, but such termination shall not affect the liability of the Insurer for the payment of any such judgment or judgments resulting from accidents which occur during the time the policy is in effect.

I hereby certify that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one of more States including Florida.

Sough & Cotanise
(Signature of Authorized Representative of Insurer)
Joseph Catanese
(Typed name)
Vice President
(Title)
Authorized Representative of
Greenwich Insurance Company (Name of Insurer)
(Titalle of library)
505 Eagleview Blvd Exton, PA 19341
(Address of Representative)