Mail original completed form to:

1.

Department of Environmental Protection 2600 Blair Stone Road, Mail Station 4560 Tallahassee, Florida 32399-2400

RECEIVED For assistante company of Forman From From Protection

JUL 25 2018

STATE OF FLORIDA CERTIFICATE OF LIABILITY INSURANCE Assistance Program

Permitting & Compliance

HAZARDOUS WASTE TRANSPORTER AND USED OIL	HANDLER
--	---------

	any	
	(Name of Insurer)	
(the "Insurer"), of 75 Federal S	Street, 5th Floor, Boston, MA 02110	
	(Address of Insurer)	-
hereby certifies that it has i environmental restoration f	ssued liability insurance cover for sudden accidental occurren	ring bodily injury and property damage including ces to
AERC Acquisition Corp. DBA AERC I	Recycling Solutions, A Clean Earth Compa	any
	(Name of Insured)	
(the "Insured"), of 4317-J For	tune Place, West Melbourne, FL 32904	
	(Physical Address of Insured)	
in connection with the insur Administrative Code Rule (red's obligation to demonstrate 62-710.600(2) and 62-730.170	e financial responsibility under Florida D. The coverage applies at:
EPA/DEP I.D. No.	Name	Physical Address
FLD984262782		
	e, West Melbourne, FL	02001
(If coverage is for multiple	facilities, identify each facility	
This insurance is <u>primary</u> ar \$ 1,000,000 for	facilities, identify each facility and the company shall not be lia r each accident, exclusive of le	r insured.) able for amounts in excess of egal defense costs. The coverage is provided
This insurance is <u>primary</u> a	facilities, identify each facility and the company shall not be live and the accident, exclusive of le	r insured.) able for amounts in excess of egal defense costs. The coverage is provided
This insurance is <u>primary</u> ar \$ 1,000,000 for	facilities, identify each facility and the company shall not be lia r each accident, exclusive of le coo7 , issued on 6/30/2 colicy is 6/30/2018	r insured.) able for amounts in excess of egal defense costs. The coverage is provided one
This insurance is <u>primary</u> at \$ 1,000,000 for under policy number 0010870 The effective date of said policy s 6/30/2019	facilities, identify each facility and the company shall not be lie r each accident, exclusive of le	r insured.) able for amounts in excess of egal defense costs. The coverage is provided one (date)
This insurance is <u>primary</u> as \$\frac{1}{1,000,000}\$ for under policy number \frac{0010870}{10010870}\$ The effective date of said possible in the policy of	facilities, identify each facility and the company shall not be lia r each accident, exclusive of le coo7 , issued on 6/30/2 colicy is 6/30/2018	r insured.) able for amounts in excess of egal defense costs. The coverage is provided (date)
This insurance is primary at \$1,000,000 for under policy number 0010876 The effective date of said policy for (date) This insurance is excess and for under policy number 10010876	facilities, identify each facility and the company shall not be liar each accident, exclusive of lead of the company shall not be liable of the company shall not be liable for each accident in excess of for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable fo	r insured.) able for amounts in excess of egal defense costs. The coverage is provided (date) and the expiration date of said policy ble for amounts in excess of the underlying limit of f legal defense costs. The coverage is provided (date) (date)
This insurance is primary at \$1,000,000 for under policy number 0010876 The effective date of said policy 6/30/2019 (date) This insurance is excess and \$5.500.000 for the effective date of said policy for the effective d	facilities, identify each facility and the company shall not be liar each accident, exclusive of lead of the company shall not be liable of the company shall not be liable for each accident in excess of for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident, exclusive of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable for each accident in excess of the company shall not be liable fo	r insured.) able for amounts in excess of egal defense costs. The coverage is provided out (date) and the expiration date of said policy ble for amounts in excess of the underlying limit of f legal defense costs. The coverage is provided The effective date of

For assistance call: 850-245-8707

- (a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the 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.

(Signature of Authorized Representative of Insurer)

Todd Smith

(Typed name)

Mid-Atlantic Regional Manager, Environmental

(Title)

Authorized Representative of

Ironshore Specialty Insurance Company

(Name of Insurer)

50 S. 16th Street, Suite 3410, Philadelphia, PA 19102

(Address of Representative)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/28/2018

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 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)4VFD PRODUCER McGriff Insurance Services Florida Department of Environmental 2500 Renaissance Blvd Suite100 King Of Prussia PA 19406-2639 Protection

JUL 25 2018 150CLEANEAR INSURED

334 South Warminster Road Permitting & Compliance Assistance Program

NAME: Felicia Gonzales	
PHONE (A/C, No, Ext): 610-279-8550	FAX (A/C, No): 610-279-8543
E-MAIL ADDRESS: fgonzales@mcgriffinsurance	
INSURER(S) AFFORDING O	OVERAGE NAIC #
INSURER A : Ironshore Specialty Insuran	ce Company 25445
INSURER B : Zurich American Insurance	Company of IL 27855
INSURER c : Steadfast Insurance Compa	ny 26387
INSURER D :	
INSURER E :	
INSURER F:	

COVERAGES

Hatboro PA 19040

CERTIFICATE NUMBER: 384190403

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

NSR TR	TYPE OF INSURANCE		SUBR WVD		POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMIT	LIMITS	
A	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- POLICY X PRO- LOC			001087007	6/30/2018	6/30/2019	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (EA occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$1,000,000 \$500,000 \$25,000 \$1,000,000 \$2,000,000 \$2,000,000	
В	AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS X HIRED AUTOS X HIRED AUTOS X AUTOS X AUTOS X AUTOS X AUTOS X AUTOS X AUTOS			BAP0081106	6/30/2018	3/1/2019	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$ 1,000,000 \$ \$ \$ \$	
\	X UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTIONS			001087107	6/30/2018	6/30/2019	EACH OCCURRENCE AGGREGATE	\$ 25,000,000 \$ 25,000,000 \$	
3	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WC819647605	3/1/2018	3/1/2019	X WC STATU- TORY LIMITS OTH- E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	\$ 1,000,000 \$ 1,000,000	
A A C	Contractors Pollution Poll Legal/Profes Cargo			001087007 001087007 CPP013465804	6/30/2018 6/30/2018 6/30/2018	6/30/2019	Limit Limit Limit	1,000,000 1,000,000 \$500000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Named Insured:

Clean Earth, Inc.

Advanced Remediation & Disposal Technologies of Delaware, LLC
AERC Acquisition Corporation dba AERC Recycling Solutions, a Clean Earth Company
AES Asset Acquisition Corporation, dba Clean Earth of Calvert City,
dba Clean Earth of Morgantown, dba American Transportation Solutions, dba AES Environmental, LLC
Allied Environmental Group, 11 C.

Allied Environmental Group, LLC

Clean Earth Dredging Technologies, Inc.

See Attached...

ERTIFICATE HOLDER	CANCELLATION
	CARCELLATION

AERC.COM, INC. Clean Earth Inc. 334 South Warminster Road Hatboro PA 19040

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

atolar

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LOC #:



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY McGriff Insurance Services POLICY NUMBER		NAMED INSURED Clean Earth Inc. 334 South Warminster Road		
		Hatboro PA 19040		
CARRIER	NAIC CODE			
		EFFECTIVE DATE:		

ADDITIONAL REMARKS

*Crime Policy Carrier: Travelers Casualty and Surety Company of America Policy # 106696669 Policy Period: 3/1/2018 to 3/1/2019 Limit: \$1,000,000

2591 Mitchell Ave, Allentown, PA, 18103 2330 26th St SW, Allentown, PA, 18103 4317 Fortune PI, Melbourne, FL, 32904 4301 Woodland Park Dr, Melbourne, FL, 32904 30677 Huntwood Ave, Hayward, CA, 94544 3301 Rosedale Ave, Richmond, VA, 23230 1733 Morgan Road Modesto, CA 95358