Mail original completed form to:

1.

Department of Environmental Protection 2600 Blair Stone Road, Mail Station 4560 Tallahassee, Florida 32399-2400 For assistance att 850 245 8707
Florida Department of Environmental
Protection

JUN 28 2019

STATE OF FLORIDA CERTIFICATE OF LIABILITY INSURANCEAssistance Program HAZARDOUS WASTE TRANSPORTER AND USED OIL HANDLER

Gemini l	Insurance Company		
	(Name of Insurer)		
(the "Insurer"), of	99 Summer Street, Suite 1800	, Boston, MA 02110	
	(Address of Insurer)		
environmental restor	it has issued liability insurance covation for sudden accidental occurr SA). Inc DBA AATCO	vering bodily injury and pences to	property damage including
TNI(O	(Name of Insured)		
(the "Insured"), of	302 Thunder Road, Duenwe (Physical Address of Insured	g, MO 64841	
in connection with th	e insured's obligation to demonstra	,	vdan Flanida
Administrative Code	Rule 62-710.600(2) and 62-730.1	70. The coverage applies	s at:
EPA/DEP I.D. No.	Name	Physica	l Address
MOR000501981	TNI (USA), Inc DBA AATCO	302 Thunder Ro	ad, Duenweg, MO 6484
9			
(If coverage is for mu	ultiple facilities, identify each facili	ity insured.)	
\$	nary and the company shall not be for each accident, exclusive of issued on	legal defense costs. The	ess of e coverage is provided
		(date)	
The effective date of:	said policy is(date)	and the expiration	date of said policy
S			
(dat	e)		
This insurance is exce 4,000,000	ess and the company shall not be li- for each accident in excess of	able for amounts in excess of the underlying limit of	ss of
1.000.000	for each accident, exclusive	of legal defense costs. T	he coverage is provided
inder policy number_	(±1/₩ 100112 V005 isomed as	6/27/2019	. The effective date of
	GVE100138905 , issued or		. The effective date of
said policy is7/1/		(date) 1 date of said policy is	7/1/2020

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Department of Environmental Protection 2600 Blair Stone Road, Mail Station 4560

Tallahassee, Florida 32399-2400

- 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.

For assistance call: 850-245-8707

- (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)	
Jason R Lewis	
(Typed name)	
Senior Vice President	
(Title)	
Authorized Representative of	
Gemini Insurance Company	
(Name of Insurer)	
99 Summer Street, Suite 1800, Boston, MA 02110	
(Address of Representative)	

Hi,

Attached is a HAZMAT filing from Gemini Insurance Company.

If you have any questions please call 617-310-8224.

Thank you!



Joseph Tricca
Underwriting Assistant
Gemini Transportation Underwriters
(a W. R. Berkley Company)
99 Summer Street, Suite 1800
Boston, MA 02110
Direct: 617.310.8224

JTricca@geminiunderwriters.com