



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/27/2020

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 a Florida Department of Environmental Protection (ies) must have ADDITIONAL INSURED provisions or 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).

PRODUCER Risk Strategies Company  
3250 N. 29th Ave  
Hollywood, FL 33020

SEP 01 2020

Permitting & Compliance  
Assistance Program

CONTACT NAME: \_\_\_\_\_  
PHONE (A/C, No, Ext): 954-963-6666 FAX (A/C, No): 954-963-9776  
E-MAIL ADDRESS: aiucerts@risk-strategies.com

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Nautilus Insurance Company 17370

INSURER B: Great Divide Insurance Company 25224

INSURER C: CM Vantage Specialty Insurance Company 15872

INSURER D: Kinsale Insurance Company 38920

INSURER E: Liberty Surplus Insurance Corporation 10725

INSURER F:

INSURED  
Environmental Management Conservation Oil Corp.  
dba EMC Oil Corp.  
8470 NW 68th Street  
Miami FL 33166

## COVERAGES

CERTIFICATE NUMBER: 57284948

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.

| INSR LTR | TYPE OF INSURANCE  | ADDL SUBR INSD WVD   | POLICY NUMBER      | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS   |
|----------|--|--|--------------------|-------------------------|-------------------------|--|
| A        | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><input checked="" type="checkbox"/> BI/PD Ded \$5,000<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: _____ |  | ECP2032812-10      | 8/17/2020               | 8/17/2021               | EACH OCCURRENCE \$1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000<br>MED EXP (Any one person) \$5,000<br>PERSONAL & ADV INJURY \$1,000,000<br>GENERAL AGGREGATE \$3,000,000<br>PRODUCTS - COMP/OP AGG \$3,000,000<br>\$ |
| B        | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY<br><input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY<br><input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY  |  | BAP202697111       | 8/17/2020               | 9/16/2020               | COMBINED SINGLE LIMIT (Ea accident) \$1,000,000<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>PIP \$10,000   |
|          | <input type="checkbox"/> UMBRELLA LIAB<br><input type="checkbox"/> EXCESS LIAB<br>DED \$ RETENTION \$  | <input type="checkbox"/> OCCUR<br><input type="checkbox"/> CLAIMS-MADE |                    |                         |                         | EACH OCCURRENCE \$<br>AGGREGATE \$<br>\$   |
|          | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY<br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below   | Y / N<br><input type="checkbox"/> N / A                                |                    |                         |                         | PER STATUTE<br>E L EACH ACCIDENT \$<br>E L DISEASE - EA EMPLOYEE \$<br>E L DISEASE - POLICY LIMIT \$   |
| A        | Contractor Pollution Liability   |  | ECP2032812-10      | 8/17/2020               | 8/17/2021               | \$1,000,000/Ded \$5K per Claim/Claims Made   |
| A        | Employee Benefits Liability  |  | ECP2032812-10      | 8/17/2020               | 8/17/2021               | \$1,000,000/Ded \$1,000 per Claim  |
| C        | Property /Hazard   |  | ECP2032812-10      | 8/17/2020               | 8/17/2021               | See Additional Remarks Schedule  |
| D        | Windstorm  |  | CMV-PRP-0021494-01 | 8/17/2020               | 8/17/2021               | See Additional Remarks Schedule  |

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

## CERTIFICATE HOLDER

## CANCELLATION

Department of Environmental Protection  
Attn: Janet Ashwood  
2600 Blair Stone Road  
Tallahassee FL 32399-2400

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

Mike Christian



# **ADDITIONAL REMARKS SCHEDULE**

Page \_\_\_\_ of \_\_\_\_

|                                   |           |  |
|-----------------------------------|-----------|--|
| AGENCY<br>Risk Strategies Company |           | NAMED INSURED<br>Environmental Management Conservation Oil Corp.<br>dba EMC Oil Corp.<br>8470 NW 68th Street<br>Miami FL 33166 |
| POLICY NUMBER                     |           |  |
| CARRIER                           | NAIC CODE | EFFECTIVE DATE:  |

## **ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**

**FORM NUMBER:** 25 **FORM TITLE:** Certificate of Liability (03/16)

**HOLDER:** Department of Environmental Protection

**ADDRESS:** Attn: Janet Ashwood 2600 Blair Stone Road Tallahassee FL 32399-2400

### **Schedule of Named Insured:**

Environmental Management Conservation Oil Corp. / EMC Oil Corp. / EMC Construction Debris Removal Services / EMC Roll Off Services / Leon Property Investment, LLC / Mel Property, Inc.

### **Insurer B: Auto Liability**

Comprehensive Deductible \$3,000

Collision Deductible \$3,000

### **INSURER C: Hazard/Property**

Premises: 8470 NW 68th Street, Miami, FL 33166/ Bldg \$550,000/ Contents \$92,900/ BI \$300,000

Special Form: 80% Coinsurance, Valuation: Replacement Cost, Deductible \$25,000.

### **INSURER D: Windstorm**

Building Value \$942,900; \$25,000 Wind/Hail per occurrence deductible; 5% Named Windstorm per occurrence subject to a \$50,000 minimum deductible

### **INSURER E: Above Ground Storage Tank Liability**

Policy Period: 08/17/2020 - 08/17/2021

Policy Number: IRONTX00905921

Limit of Liability: \$1,000,000 each Incident Limit/Aggregate Limit \$2,000,000

Tank 1: \$15,000 Deductible Each Pollution Incident

Tank 2: \$25,000 Deductible Each Pollution Incident