

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/2/2021

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 policy require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s) the policy of Environments:

PRODUCER	Protection	GONTACT Linda Weal	
Guy Hurley, LLC		HONE (A/C, No, Ext): (248) 519-1400 FAX (A/C, No): (248) 519-	-1401
989 E. South Boulevard	FEB 16 2021	6-MAIL ADDRESS: 1weal@ghbh.com	
Suite 200		INSURER(S) AFFORDING COVERAGE	NAIC #
Rochester Hills M	48307	INSURERA: The Charter Oak Fire Insurance Company	
INSURED	Permitting & Compliance	INSURER B: Phoenix Insurance Company	
Alta Construction Equipme	t F1. Assistance Program	INSURER C: Travelers Property Casualty Co. of Amer	
8418 Palm River Road		INSURER D: The Travelers Indemnity Co.	
		INSURER E :	
Tampa FI	33619	INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 21-22 Master FL

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.

	TYPE OF INSURANCE			POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S	
X	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$	1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
x	Contractual Liabiilty			6605P968265	2/14/2021	4/1/2021	MED EXP (Any one person)	\$	5,000
x	XCU Coverage Included						PERSONAL & ADV INJURY	\$	1,000,000
GEN							GENERAL AGGREGATE	\$	3,000,000
x	POLICY X PRO- JECT LOC	1					PRODUCTS - COMP/OP AGG	\$	3,000,000
	OTHER:							\$	
AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
X ANY AUTO						·	BODILY INJURY (Per person)	\$	
	ALL OWNED SCHEDULED AUTOS			8105P963374	2/14/2021	4/1/2021	BODILY INJURY (Per accident)	\$	
X	HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
								\$	_
X	UMBRELLA LIAB X OCCUR			-			EACH OCCURRENCE	\$ 1	15,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$1	15,000,000
	DED RETENTION \$			CUP5P969213	2/14/2021	4/1/2021		\$	
	EMDI OVEDE'I IADILITY						X PER OTH-		
ANY PROPRIETOR/PARTNER/EXECUTIVE		N/A					E.L. EACH ACCIDENT	\$	1,000,000
(Mar	edatory in NH)	N/A		UB-5P966597	2/14/2021	4/1/2021	E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
DES	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
Inl	land Marine			QT6301J683833	2/14/2021	4/1/2021	Leased/Rented	\$	2,500,000
	X X GET X AUT X WOF ANY OFFI If yees	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X COntractual Liability X XCU Coverage Included GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY X PRODUCE OTHER: AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS X HIRED AUTOS X NON-OWNED AUTOS X HIRED AUTOS X OCCUR EXCESS LIAB CLAIMS-MADE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N Y / N	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X COntractual Liability X XCU Coverage Included GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY X PRO- OTHER: AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS AUTOS X HIRED AUTOS X NON-OWNED AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTINER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandator) IN H) If yes, describe under DESCRIPTION OF OPERATIONS below	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X CONTRACTUAL LIABILITY X XCU COVERAGE INCLUDED GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY X PRODUECT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS AUTOS X HIRED AUTOS X NON-OWNED AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X COntractual Liability X XCU Coverage Included GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY X PRO- LOC OTHER: AUTOMOBILE LIABILITY X ANY AUTO AUTOS AUTOS AUTOS X HIRED AUTOS X AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS: LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDEO? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below 6605P968265 6605P968265 6605P968265 8105P968265	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X COntractual Liabiilty XCU Coverage Included GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO OTHER: AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS HIRED AUTOS X HIRED AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$ CUP5P969213 CUP5P966597 CUP5P966597 CUP5P966597 CUP5P966597 CUP5P966597 CUP5P966597 CUP5P966597 CUP5P966597	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X Contractual Liability X XCU Coverage Included GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY X PRODUCY X PECT LOC OTHER: AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS AUTOS HIRED AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$ CUP5P969213 CUP5P969213 CUP5P96597 LOC VIB-5P966597 LOC CUP5P966597 LOC A/1/2021 CUP5P966597 AVBRORRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) LISE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR CONTractual Liability X COLOR CONTRACTUAL LIABILITY CEACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMPIOP AGG OTHER: AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS AUTOS X NON-OWNED AUTOS X NON-OWNED AUTOS X NON-OWNED AUTOS X OCCUR EXCESS LIAB CLAIMS-MADE CUPSP969213 CUPSP969213 CUPSP969213 CUPSP969213 AVIACOL BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) PROPERTY DAMAGE (Per accident) AVIACOL AVIACOL	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR CONTractual Liability X COntractual Liability ACU Coverage Included GENLAGGREGATE LIMIT APPLIES PER: X POLICY X JECT LOC OTHER: AUTOMOBILE LIABILITY ALL OWNED ALL OWNED ALTOS NON-OWNED AUTOS X WORKER LIABILITY ALL OWNED AUTOS X HIRED AUTOS X WORKERS COMPENSATION AUTOS X WORKERS COMPENSATION AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE CUPSP969213 CUPSP969213 CUPSP96957 CUPSP966597 CUAINS-MADE EACH OCCURRENCE S DAMAGE TO RENTED S MED EXP (Any one person) S MED EXP (Any one person) S GENERAL AGOREGATE S PRODUCTS - COMPIOP AGG S COMBINED SINGLE LIMIT (Ea accident) S BODILY INJURY (Per person) S BODILY INJURY (Per person) S DOILY INJURY (Per accident) S PROPERTY DAMAGE (Per accident) S AGREGATE S S WORKERS COMPENSATION AND EMPLOYERS LIABILITY NN PROPRIETOR/PARTINER/EXECUTIVE NN N/A NI PROPRIETOR/PARTINER/EXECUTIVE NN N/A I Was - Sp966597 UB-5P966597 UB-5P966597 CUPSP966597 EACH OCCURRENCE S ELL DISEASE - EA EMPLOYEE S ELL DISEASE - FA EMPLOYEE S ELL DISEASE - POLICY LIMIT S

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

Waiver of Subrogation applies in favor of the Additional Insureds for Workers Compensation when required by written contract; unless prohibited by specific state law.

FRT	TF10	CAT	FH	OL	DER

CANCELLATION

Department of Environmental Protection 2600 Blairstone Rd Mail Station 4560 Tallahassee, FL 32399-6516 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

Richard McGregor/WEAL

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