Mail original completed form to: Department of Environmental Protection

2600 Blair Stone Road, Mail Station 4560

Tallahassee, Florida 32399-2400

For assistance call: 850-245-8707

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

	nsurance Company (Name of Insurer)		
(the "Insurer"), of_	Two Ravinia Drive Suite (Address of Insurer)	2 1100 Atlanta GA 30346	
	it has issued liability insurance coration for sudden accidental occur	overing bodily injury and property damage including rrences to	
Remtech,	Inc		
	(Name of Insured)		
(the "Insured"), of _	f200 Cobb Parkway Ste 208 Marietta Ga 30062 (Physical Address of Insured)		
	he insured's obligation to demons e Rule 62-710.600(2) and 62-730	trate financial responsibility under Florida .170. The coverage applies at:	
EPA/DEP I.D. No.	Name	Physical Address	
Of accompany is form	which facilities identify each for	ility inqued)	
(If coverage is for n	nultiple facilities, identify each fac	cility insured.)	
This insurance is pri	mary and the company shall not b	be liable for amounts in excess of	
This insurance is pri	mary and the company shall not b	•	
This insurance is <u>pri</u> \$_1,000,000 under policy numbe	mary and the company shall not b	be liable for amounts in excess of of legal defense costs. The coverage is provided 06/29/2023	
This insurance is pri \$_1,000,000 under policy numbe The effective date o	imary and the company shall not be for each accident, exclusive rECP2040753, issued on 9 feating policy is 06/29/2023	be liable for amounts in excess of of legal defense costs. The coverage is provided 06/29/2023 (date)	
This insurance is pris 1,000,000 under policy numbe The effective date of the control of the co	for each accident, exclusive rECP2040753, issued on for each accident, exclusive recompany shall not be each accident.	be liable for amounts in excess of of legal defense costs. The coverage is provided 06/29/2023 (date) and the expiration date of said policy liable for amounts in excess of	
This insurance is pri \$_1,000,000 under policy numbe The effective date of the control of the	for each accident, exclusive rECP2040753, issued on f said policy is(date) ate) cess and the company shall not befor each accident in exces for each accident, exclusive.	be liable for amounts in excess of of legal defense costs. The coverage is provided 06/29/2023 (date) and the expiration date of said policy liable for amounts in excess of so of the underlying limit of ye of legal defense costs. The coverage is provided	
This insurance is pri \$_1,000,000 under policy numbe The effective date of the control of the	for each accident, exclusive rECP2040753, issued on	be liable for amounts in excess of of legal defense costs. The coverage is provided 06/29/2023 (date) and the expiration date of said policy liable for amounts in excess of so of the underlying limit of the one of legal defense costs. The coverage is provided on 06/29/2023 (date)	
This insurance is prish_1,000,000 under policy numbe The effective date of section of the secti	for each accident, exclusive rECP2040753, issued on	be liable for amounts in excess of of legal defense costs. The coverage is provided 06/29/2023 (date) and the expiration date of said policy liable for amounts in excess of so of the underlying limit of ye of legal defense costs. The coverage is provided	

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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.
- (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.

Docusigned by:
Amber Byers
(Signature of Authorized Representative of Insurer)
Amber Byers
(Typed name)
Account Manager
(Title)
Authorized Representative of
Remtech, Inc
(Name of Insurer)
200 Cobb Parkway Ste 208 Marietta Ga 30062
(Address of Representative)