

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

1. Zurich American Insurance Company  
(Name of Insurer)

(the "Insurer"), of 1299 Zurich Way, Schaumburg, IL 60796  
(Address of Insurer)

hereby certifies that it has issued liability insurance covering bodily injury and property damage including environmental restoration for sudden accidental occurrences to

Enhanced Environmental & Emergency Services, Inc  
(Name of Insured)

(the "Insured"), of 9361 Hamman Avenue, Pensacola, FL 32514  
(Physical Address of Insured)

in connection with the insured's obligation to demonstrate financial responsibility under Florida Administrative Code Rule 62-710.600(2) and 62-730.170. The coverage applies at:

<u>EPA/DEP I.D. No.</u>	<u>Name</u>	<u>Physical Address</u>
<u>FLR000231274</u>	<u>Enhanced Environmental &amp; Emergency Services, Inc</u>	<u>9361 Hamman Avenue, Pensacola, FL 32514</u>

(If coverage is for multiple facilities, identify each facility insured.)

This insurance is primary and the company shall not be liable for amounts in excess of \$ 1,000,000 for each accident, exclusive of legal defense costs. The coverage is provided under policy number BAP562773201, issued on 11/01/2020.  
(date)


The effective date of said policy is 11/01/2020 and the expiration date of said policy is 11/01/2021.  
(date)

This insurance is excess and the company shall not be liable for amounts in excess of \$ 15,000,000.00 for each accident in excess of the underlying limit of \$ 1,000,000.00 for each accident, exclusive of legal defense costs. The coverage is provided under policy number EX00E9920, issued on 11/01/2020. The effective date of said policy is 11/01/2020 and the expiration date of said policy is 11/01/2021.  
(date) (date)

Mail original completed form to: Department of Environmental Protection For assistance call: 850-245-8707  
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.
  - (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)

Linda Sue Ray  
\_\_\_\_\_  
(Typed name)

Commercial Lines Account Manager  
\_\_\_\_\_  
(Title)

Authorized Representative of

Zurich American Insurance Company  
\_\_\_\_\_  
(Name of Insurer)

2014 W Pinhook Road, Suite 610, Lafayette, LA 70508  
\_\_\_\_\_

(Address of Representative)

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Tallahassee, Florida 32399-2400

RECEIVED  
850-245-8707  
Department of Environmental Protection  
MAY 06 2021  
Permitting & Compliance Assistance Program

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

1. Steadfast Insurance Company  
(Name of Insurer)  
(the "Insurer"), of 1400 American Lane, Tower2, Floor 5, Schaumburg, IL 60196  
(Address of Insurer)

hereby certifies that it has issued liability insurance covering bodily injury and property damage including environmental restoration for sudden accidental occurrences to

Enhanced Environmental & Emergency Services, Inc  
(Name of Insured)  
(the "Insured"), of 9361 Hamman Avenue, Pensacola, FL 32514  
(Physical Address of Insured)

in connection with the insured's obligation to demonstrate financial responsibility under Florida Administrative Code Rule 62-710.600(2) and 62-730.170. The coverage applies at:

<u>EPA/DEP I.D. No.</u>	<u>Name</u>	<u>Physical Address</u>
<u>FLR000231274</u>	<u>Enhanced Environmental &amp; Emergency Services, Inc</u>	<u>9361 Hamman Avenue, Pensacola, FL 32514</u>

(If coverage is for multiple facilities, identify each facility insured.)

This insurance is primary and the company shall not be liable for amounts in excess of \$ 1,000,000 for each accident, exclusive of legal defense costs. The coverage is provided under policy number GPL562773301, issued on 11/01/2020.  
(date)


The effective date of said policy is 11/01/2020 and the expiration date of said policy is 11/01/2021.  
(date)

This insurance is excess and the company shall not be liable for amounts in excess of \$ 15,000,000.00 for each accident in excess of the underlying limit of \$ 1,000,000.00 for each accident, exclusive of legal defense costs. The coverage is provided under policy number EX00E9920, issued on 11/01/2020. The effective date of said policy is 11/01/2020 and the expiration date of said policy is 11/01/2021.  
(date) (date)

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Tallahassee, Florida 32399-2400

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- (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)

Linda Sue Ray  
(Typed name)

Commercial Lines Account Manager  
(Title)

Authorized Representative of

Steadfast Insurance Company  
(Name of Insurer)

2014 W Pinhook Road, Suite 610, Lafayette, LA 70508

(Address of Representative)

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

1. Steadfast Insurance Company  
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(the "Insurer"), of 1400 American Lane, Tower2, Floor 5, Schaumburg, IL 60196  
(Address of Insurer)

hereby certifies that it has issued liability insurance covering bodily injury and property damage including environmental restoration for sudden accidental occurrences to

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(Name of Insured)  
(the "Insured"), of 9361 Hamman Avenue, Pensacola, FL 32514  
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in connection with the insured's obligation to demonstrate financial responsibility under Florida Administrative Code Rule 62-710.600(2) and 62-730.170. The coverage applies at:

<u>EPA/DEP I.D. No.</u>	<u>Name</u>	<u>Physical Address</u>
FLR000231274	Enhanced Environmental & Emergency Services, Inc	9361 Hamman Avenue, Pensacola, FL 32514

(If coverage is for multiple facilities, identify each facility insured.)

This insurance is primary and the company shall not be liable for amounts in excess of \$ 1,000,000 for each accident, exclusive of legal defense costs. The coverage is provided under policy number GPL562773301, issued on 11/01/2020.  
(date)

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(date)

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(date)

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(Signature of Authorized Representative of Insurer)

Linda Sue Ray  
\_\_\_\_\_  
(Typed name)

Commercial Lines Account Manager  
\_\_\_\_\_  
(Title)

Authorized Representative of

Steadfast Insurance Company  
\_\_\_\_\_  
(Name of Insurer)

2014 W Pinhook Road, Suite 610, Lafayette, LA 70508  
\_\_\_\_\_

(Address of Representative)





**ADDITIONAL REMARKS SCHEDULE**

AGENCY BXS Insurance		NAMED INSURED Enhanced Environmental & Emergency Services, Inc.	
POLICY NUMBER		PO Box 7 Clinton MS 39060	
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 INSURANCE**

Auto includes:  
Blanket Additional Insured, Blanket Waiver of Subrogation, Pollution Liability Broadened Coverage for Covered Autos (CA9948), 30 Day Notice of Cancellation, and MCS90. Comprehensive and Collision Deductibles: Light/Medium/PPTs \$2,500 Comprehensive & \$2,500 Collision; Heavy/Extra Heavy Trucks \$5,000 Comprehensive & \$5,000 Collision; Tractors \$5,000 Comprehensive & \$5,000 Collision; Trailers \$1,000 Comprehensive & \$1,000 Collision; Hired Car \$1,000 Comprehensive & \$1,000 Collision.

Workers Compensation:  
Tim Parkman Excluded, Blanket Alternate Employer, US Longshore & Harbor Workers Compensation Act, Outer Continental Shelf Land Act Endorsement, Blanket Waiver of Subrogation, & 30 Day Notice of Cancellation

Contractors Pollution Liability Includes:  
Marine Vessel Pollution and Transportation Pollution Liability - \$1,000,000 Each Pollution Condition, and Non-Owned Site Disposal Coverage

Equipment Floater:  
Special Form, includes \$10,000 waterborne, Blanket Loss Payee

Excess Liability Includes:  
Follows form on General Liability, Auto, Employers Liability, Professional Liability, and Contractors Pollution.

General Liability, Auto and Umbrella Policies Include 30 Day Notice of Cancellation in favor of Department of Environmental Protection