

ACORD®

CERTIFICATE OF MARINE / ENERGY INSURANCE

DATE (MM/DD/YYYY)

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 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).

th	is certificate does not confer rights	to the	cert	ificate holder in lieu of s).					
PROD	DUCER				CONTACT NAME:							
					PHONE FAX (A/C, No, Ext): (A/C, No):							
					E-MAIL ADDRESS:							
					PRODUCER CUSTOMER ID #:							
					CUSTO	NAIC#						
INSU	RED				INSURE	NAIC#						
					INSURE	RB:						
					INSURE	RC:						
					INSURE	RD:						
					INSURER E :							
					INSURER F:							
COVERAGES CERTIFICATE NUMBER:						REVISION NUMBER:						
INI	IS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RETIFICATE MAY BE ISSUED OR MAY CLUSIONS AND CONDITIONS OF SUCH	EQUIF PERT POLI	REME TAIN,	NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF AN	Y CONTRACT THE POLICIE REDUCED BY	OR OTHER I S DESCRIBEI PAID CLAIMS.	DOCUMENT WITH RESPE	CT TO	WHICH THIS		
LTR	TYPE OF INSURANCE		WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT				
	HULL AND MACHINERY							PER SCHEDULE ON FILE				
								INSURED VALUE	\$			
	COLLISION LIABILITY							COLLISION (Ea occurrence)	\$			
	TOWERS LIABILITY							TOWERS (Ea occurrence)	\$			
									\$			
	PROTECTION AND INDEMNITY							PER CLUB RULES				
	CREW LIABILITY JONES ACT							EA OCCURRENCE PER VESSEL, CSL	\$			
	COLLISION LIABILITY							COLLISION (Ea occ), CSL	\$			
	TOWERS LIABILITY							TOWERS (Ea occ), CSL	\$			
	REMOVAL OF WRECK							REMOVAL OF WRECK (Ea occurrence)	\$			
	IN REM							(La occurrence)	\$			
									\$			
									\$			
	POLLUTION LIABILITY	1						EA OCCURRENCE	\$			
	OPA 90								\$			
-	CERCLA							4	\$			
-	NON-OPA / NON-CERCLA								\$			
-									\$	F		
	MARITIME EMPLOYERS LIABILITY	+						ANY ONE PERSON	\$			
H	ALTERNATE EMPLOYER							ANY ONE ACCIDENT				
-	INCLUDES CREW EMPS							7.III OIL /IOODLIII	\$			
+	JONES ACT	N/A							\$			
+	DEATH ON THE HIGH SEAS	N/A							\$			
-									\$			
-	IN REM ENDORSEMENT								\$			
		-							\$			
									\$			
									\$			
				***************************************					\$			
CER	TIFICATE HOLDER		13.00		CANO	ELLATION						
TEXAS DEPT. OF INSURANCE AUSTIN, TEXAS APPROVED MAY 14 2015						SHOULD ANY OF THE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE						

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COVERAGES

					ER:	

INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$		
	MARINE GENERAL LIABILITY					To the same of the	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$		
	CLAIMS-MADE OCCUR						MED EXP (Any one person)	\$		
							PERSONAL & ADV INJURY	\$		
							GENERAL AGGREGATE	\$		
	GEN'L AGGREGATE LIMIT APPLIES PER:		-				PRODUCTS-COMP / OP AGG	\$		
l	POLICY PRO- JECT LOC							\$		
	OTHER:							\$		
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT	\$		
	ANY AUTO SCHEDULED						(Ea accident) BODILY INJURY (Per person)	\$		
l	OWNED AUTOS NON-OWNED						BODILY INJURY (Per accident)			
	AUTOS ONLY AUTOS ONLY HIRED						PROPERTY DAMAGE	\$		
	WORKERS COMPENSATION						(Per accident) PER OTH-	<u> </u>		
	AND EMPLOYERS LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE						E.L. (Each accident)	\$		
	OFFICER/MEMBER EXCLUDED?						E.L. DISEASE (Ea employee)			
	(Mandatory in NH) If yes, describe under DESCRIPTION						E.L. DISEASE - POLICY LIMIT	\$		
	OF OPERATIONS below ALTERNATE EMPLOYER	N/A					E.E. DISEASE -1 SEIST EINIT	\$		
	USL&H ENDORSEMENT							\$		
	MARITIME EMPLOYERS LIABILITY							\$		
-								\$		
	OCSL ACT U.S. LONGSHORE & HARBOR WORKERS						PER OTH-	\$		
	COMPENSATION ACT						STATUTE - ER			
	ALTERNATE EMPLOYER						E.L. (Each accident)	\$		
-	MARITIME EMPLOYERS LIABILITY	N/A					E.L. DISEASE (Ea employee)	\$		
	OCSL ACT						E.L. DISEASE - ANN AGG	\$		
								\$		
	AIRCRAFT LIABILITY						EACH OCCURRENCE	\$		
	OWNED AIRCRAFT						AGGREGATE	\$		
	NON-OWNED AIRCRAFT							\$		
	PASSENGER LIABILITY					ne en e		\$		
								\$		
L	UMBRELLA / EXCESS LIAB / BUMBERSHOOT					and the second	EACH OCCURRENCE	\$		
	UMBRELLA BUMBERSHOOT					THE PARTY OF THE P	AGGREGATE	\$		
	EXCESS							\$		
	CLAIMS MADE OCCUR							\$		
	DED RETENTION\$							\$		
	ENERGY CONTROL OF WELL / OPERATORS EXTRA EXPENSE			`			CSL, ANY ONE OCCURRENCE (100% interest)	\$		
	CARE, CUSTODY AND CONTROL (CCC)						ANY ONE OCCURRENCE (100% interest)	\$		
	OFFSHORE OIL AND GAS PROPERTY									
	PLATFORMS						VALUES AS SCHEDULED	\$		
	PIPELINES						VALUES AS SCHEDULED	\$		
								\$		
								\$		
	ONSHORE OIL AND GAS PROPERTY				To constitute of the constitut					
	OIL & GAS PROPERTY				The state of the s		VALUES AS SCHEDULED	\$		
	CONTRACTORS EQUIPMENT						VALUES AS SCHEDULED	\$		
f								\$		
ŀ	NAMED WINDSTORM									
	CCC OFF- ON- SHORE SHORE						AGGREGATE	\$		
	SEL(S): AS PER ATTACHED S			AS DETAILED IN THE			IONS -			
DESC	DESCRIPTION OF OPERATIONS / LOCATIONS (ACORD 101, Additional Remarks Schedule, may be attached, if more space is required)									

TEXAS DEPT. OF INSURANCE AUSTIN, TEXAS APPROVED MAY 1 4 2015