

SL12456

TEXAS DEPT. OF INSURANCE  
AUSTIN, TEXAS  
APPROVED  
OCT 13 2015



Certificate of Insurance

<b>Certificate Holder:</b>	<b>Insured's Name and Address:</b>	<b>Producer:</b>
<b>Policy Number:</b>	<b>Effective Date:</b>	<b>Expiration Date:</b>
<b>Insured Type:</b> <input type="checkbox"/> Named Insured <input type="checkbox"/> Insured <input type="checkbox"/> Locum Tenens		
<b>Coverage A Type:</b> <input type="checkbox"/> Shared Limits <input type="checkbox"/> Separate Limits		
<b>Specialty:</b>		

**Important:** This certificate certifies that the policy shown above has been issued and includes coverage for the Insured shown for the period indicated, subject to the policy's provisions and the required payment of premium. It is not an insurance policy and is issued for informational purposes only. It confers no rights upon the certificate holder and does not create a contract between NORCAL Mutual Insurance Company (NORCAL Mutual) and the certificate holder, nor does it amend, extend, or alter the policy's coverage. Notwithstanding any requirement or provision of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policy is subject to the provisions of the policy.

The Insured is responsible for informing certificate recipients of any policy changes, including declination of issuance or cancellation before the expiration date. An Insured's failure to provide such notice imposes no obligation or liability of any kind upon NORCAL Mutual, its agents or representatives.

**Coverages and Limits of Coverage Provided**

<b>By:</b> NORCAL Mutual Insurance Company	<b>Date Issued:</b>
Signature	Signature
Printed Name	Printed Name
President & CEO	Secretary