



TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157
help@tdlr.texas.gov • www.tdlr.texas.gov

5666495

USED AUTOMOTIVE PARTS RECYCLERS CERTIFICATE OF INSURANCE

This certificate is issued to the Texas Department of Licensing and Regulation as a matter of information only and confers to rights upon the certificate holder. This Certificate of Insurance does not affirmatively or negatively amend, extend or alter the coverage afforded by the policy specified herein.

This certificate is used only to indicate general liability insurance coverage. This document is intended to the existence of active general liability insurance coverage for the licensee, as required by TDLR Rule §87.40.

Business Name: _____ Business dba: _____

Business Physical Location: _____
Number, Street Name, Suite Number City State Zip code

If more than one Business Name and Location enter below: (See attached page to provide additional business names and locations)

Business Name: _____

Business Physical Location: _____
Number, Street Name, Suite Number City State Zip code

Business Name: _____

Business Physical Location: _____
Number, Street Name, Suite Number City State Zip code

Insurance Company: _____ Policy Number: _____
Binders or declarations are not accepted

Term Dates: _____ Amount of Coverage: _____
Effective (mm/day/year) Expiration (mm/day/year) Minimum Required \$250,000.00

Name of Insurance Agency: _____ Name of Agent: _____

Insurance Agency Address: _____
Number, Street Name, Suite Number City State Zip code

Agent Phone Number: _____
(Area Code and Phone Number)

I certify that this insurance company is licensed to do business by the Texas Department of Insurance or is an Eligible Surplus Lines Carrier. I further certify that this policy meets the minimum requirements for a Used Automotive Parts Recycler License, with aggregate amounts no less than the minimum class amount of \$250,000.

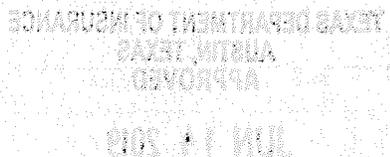
Printed Name _____

Signature _____

CERTIFICATE HOLDER ADDRESS:
Texas Department of Licensing and Regulation
P.O. Box 12157
Austin, TX 78711-2871
Phone: (512) 463-6599 • Fax: (512) 475-2871
www.tdlr.texas.gov

**TEXAS DEPARTMENT OF INSURANCE
AUSTIN, TEXAS
APPROVED**

JUN 14 2019



ADDITIONAL BUSINESS NAMES AND LOCATIONS

Business Name: _____

Business Physical Location: _____
Number, Street Name, Suite Number City State Zip code

Business Name: _____

Business Physical Location: _____
Number, Street Name, Suite Number City State Zip code

Business Name: _____

Business Physical Location: _____
Number, Street Name, Suite Number City State Zip code

Business Name: _____

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