

12/26/12



# AIR-SUR, INC

141 Sage Brush Trail  
Suite A  
Ormond Beach  
Florida 32174

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800-342-3896  
Fax: 386-677-2690  
Email: air-sur@air-sur.com

## CERTIFICATE OF INSURANCE

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 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).

**Insured:**

**Registered Owner:**

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies. Limits shown may have been reduced by paid claims.

Company Affording Coverage	Policy Number	Policy Period
		12:01 a.m. to

  

Coverage Aircraft Liability	Each Person	Limits of Liability	
		Each Person	Each Occurrence
Combined Single Limit Bodily Injury and Property Damage Including Passengers Passenger Bodily Injury Limited to:	\$	\$	Included

Aircraft Physical Damage				Deductibles		
FAA #	Make and Model	Year	Insured Value	Not In Motion	In Motion	Coverage Purchased
N			\$	\$	\$	A, B

B. All Risk Ground, Taxi and In Flight

C. All Risk Not In Flight

D. All Risk Not In Motion

Other:

**THIS CERTIFICATE REPLACES ANY PREVIOUSLY ISSUED CERTIFICATES.**

**CERTIFICATE HOLDER:**

**CANCELLATION:** Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions.

Authorized Representative

Issue Date

Reg Own 10 05

TEXAS DEPT OF INSURANCE  
JUL 03 2012