

PETROLEUM TRADERS CORPORATION

7120 Point Inverness Way
Fort Wayne, IN 46804-7928
(260) 432-6622

4/25/2017

City of Delray Beach
Purchasing Division
100 N.W. 1st Avenue
Delray Beach, FL 33444

Re: Letter of Intent

It is Petroleum Traders intent to supply and deliver approximately 240,000 gallons of gasoline and 102,500 gallons of diesel fuel to the City of Delray Beach, FL within the qualifications set forth in the bid document.

Contract Sales Bid Department

All contact regarding bids or awarded contracts are handled by the Contract Sales Bid Department. This will include all requests for fuel delivery as well as any questions about contract specifications, invoicing, pricing, taxes, or product information.

Orders can be placed by emailing bidorders@petroleumtraders.com or by calling **1-800-348-3705 option 4**. Any staff member who answers will be able to assist you.

Company Representatives that will be servicing your fuel contract if awarded, include, but are not limited to, the following Contract Sales Specialists.

The current Bid staff includes the following members

Renee Boyd	Stephen Reuille	Austin Girardot
Aaron Jorgensen	Adam Carteaux	Rob Irwin
Bret Rhen	Kevin Smith	Seth Henline
Mariah Moonen	Tricia Alonzo	Alysha Waldren
Kara Clark		

Gayle Newton is the Contract Sales/Bids Manager. Her email is gnewton@petroleumtraders.com. **Joseph Vanderpool and Amanda Durnell are the Assistant Managers.** Their email is jvanderpool@petroleumtraders.com and adurnell@petroleumtraders.com respectively.

For our customer's convenience, Petroleum Traders Corporation may be reached 24 hours a day, 7 days a week, 365 days a year. During normal business hours of 7AM to 5PM we may be reached at 800-348-3705 option 4.

For after hours, weekends, or holidays dial the same number, but choose option #1 for the on call member of our dispatch staff and leave a message. All calls are returned within one hour.

Linda Stephens,
Vice President

The Indiana Secretary of State filing office certifies that this copy is on file in this office.

Form SSC-01
State Form 4158

STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE

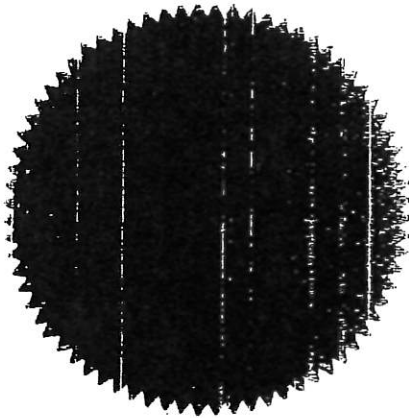
CERTIFICATE OF INCORPORATION
OF

PETROLEUM TRADERS CORPORATION

I, EDWIN J. SIMCOX, Secretary of State of the State of Indiana, hereby certify that Articles of Incorporation of the above Corporation, in the form prescribed by my office, prepared and signed in duplicate by the incorporator(s), and acknowledged and verified by the same before a Notary Public, have been presented to me at my office accompanied by the fees prescribed by law; that I have found such Articles conform to law; that I have endorsed my approval upon the duplicate copies of such Articles; that all fees have been paid as required by law; that one copy of such Articles has been filed in my office; and that the remaining copy of such Articles bearing the endorsement of my approval and filing has been returned by me to the incorporator(s) or his (their) representatives; all as prescribed by the provisions of theINDIANA GENERAL CORPORATION ACT.....

....., as amended.

NOW, THEREFORE, I hereby issue to such Corporation this Certificate of Incorporation, and further certify that its corporate existence has begun.



In Witness Whereof, I have hereunto set my hand and affixed

the seal of the State of Indiana, at the City of Indianapolis,

this 3rd day of

July 79

....., 19.....

EDWIN J. SIMCOX, Secretary of State

By..... Deputy

NOTE: This form may now also be used for incorporating pursuant to the Medical Professional Corporation Act, the Dental Professional Corporation Act, and the Professional Corporation Act of 1965, as well as the General Corporation Act. If the corporation is to be formed pursuant to the authority of one of these statutes other than the General Corporation Act, so indicate in the preamble below by striking the references to the three inappropriate statutes. Professional Accounting Corporations are considered to be formed pursuant to the authority of the Indiana General Corporation Act, but subject to the provisions of IC 23-1-13.5, and appropriate statutory reference should be made in the preamble or Article II below.

APPROVED
AND
FILED

JUL 8 1979

Edwin J. Simcox
SECRETARY OF STATE OF INDIANA

Corporate Form No. 101 (Jan. 1977)—Page One

ARTICLES OF INCORPORATION

Edwin J. Simcox, Secretary of State of Indiana

Use White Paper—Size 8 1/2 x 11—For Inserts

Filing Requirements—Present 2 originally signed and fully executed copies to Secretary of State, Room 155, State House, Indianapolis 46204

Recording Requirements—Recording of Articles of Incorporation in the Office of the County Recorder is no longer required by the Indiana General Corporation Act.

**ARTICLES OF INCORPORATION
OF**

PETROLEUM TRADERS CORPORATION

The undersigned incorporator or incorporators, desiring to form a corporation (hereinafter referred to as the "Corporation") pursuant to the provisions of the Indiana General Corporation Act (Medical Professional Corporation Act/ Dental Professional Corporation Act/Professional Corporation Act of 1965), as amended (hereinafter referred to as the "Act"), execute the following Articles of Incorporation.

ARTICLE I

Name

The name of the Corporation is **PETROLEUM TRADERS CORPORATION**

ARTICLE II

Purposes

The purposes for which the Corporation is formed are:

Section 1. To carry on the general business of dealing in the purchase and sale, at wholesale or retail, along with its transportation and storage of gasoline, oil or other petroleum products of every kind, character and nature; to trade, barter and deal in petroleum products as a broker, purchaser, owner, seller, retailer, wholesaler; to establish permanent supply bases for gas, oil or petroleum products of every kind, character and nature; to deal in additional fuel systems and fuels of every kind, character and description and for whatever use.

The Indiana Secretary of State filing office certifies that this copy is on file in this office.

Section 2. To buy, sell, hold, mortgage, pledge, exchange, rent or manage personal and real property of every kind, character, and description whatsoever and wheresoever situated and any interest therein.

Section 3. To do everything necessary, proper, advisable or convenient for the accomplishment of the purposes or the attainment of any of the objectives and the furtherance of any of the powers herein set forth; to do every other act or thing incidental thereto and in connection therewith which is not forbidden by the laws of the State of Indiana or the Provisions of the Articles of Incorporation and to have, exercise and enjoy all of the rights, privileges and powers authorized Corporations under the Indiana General Corporation Acts and all the amendments thereto the same as if they were specifically herein set forth and enumerated.

LYNWOOD ROBERTS, TAX COLLECTOR
231 East Forsyth Street Room 212
Jacksonville, FL 32202



FAX TRANSMITTAL FORM

DATE: 1/3/01

TIME _____

FAX NUMBER SENDING TO: 219-432-6564TO: KATHY THAYERCOMPANY'S NAME: PETROLEUM TRADERS CORPCOMPANY'S PHONE#: 219 432 6622FROM: EDGAR VENZONTOTAL NUMBER OF PAGES(INCLUDING COVER PAGE) 2

MESSAGE: YOUR DEALER # IS 6523. AS A RESULT YOU WILL
BE RECEIVING MONTHLY A TAX RETURN (PUBLIC SERVICE)
FORM. SINCE JTA IS TAX EXEMPT RETURN THE FORM
WITH \$ AMOUNT. PREADDRESSED ENVELOP IS ALSO
ENCLOSED. ANY QUESTION, PLS CALL ME.

ACCOUNTING SERVICES

FAX: 904-630-7134

PH#: 904-630-2022



PUBSRV INQ PSHIST PUBLIC SERVICE TAX MASTER DUP PG

I EV PERIOD PRINTER

FOR INQUIRY, INDICATE KEY TYPE: DEALER NO X BUSINESS NAME X LOC ADDR X

ADD COMPLETE FOR 6523

DEALER NO	TYPE	TRAN CODE	INDEX	SUBJECT	GL-ACCT	STAT	DELQ COUNT
6523		701	JXSP011	31470			

BUSINESS NAME PETROLEUM TRADERS CORPORATION

NAME 2

ATTN KATHY THAYER

----- LOCATION ADDRESS -----

STREET NO	7110	NAME POINT INVERNESS	TYPE WY	DIR	APT NO.
CITY FORTH WAYNE		STATE IN	ZIP 46804		PHONE

----- MAILING ADDRESS -----

STREET NO.	7110	NAME POINT INVERNESS	TYPE WY	DIR	APT NO.
CITY FORTH WAYNE		STATE IN	ZIP 46804	CR	PH 219 432-6622

CREATION DT: 01/03/2001 LAST BILL DATE : 000000

START BILL DT: 01/2001 LAST ACTIVITY: LAST ACTIVITY DT: 01/03/2001

COMMENT FEIN: 35-1462227

Form 1
Bid Submittal Signature Page

By signing this Bid, the Bidder certifies that it satisfies all legal requirements as an entity to do business with the City, including all Code of Ethics provisions.

Firm Name: Petroleum Traders Corporation

Street Address: 7120 Pointe Inverness Way Fort Wayne, IN 46804

Mailing Address (if different from Street Address): 7120 Pointe Inverness Way Fort Wayne, IN 46804

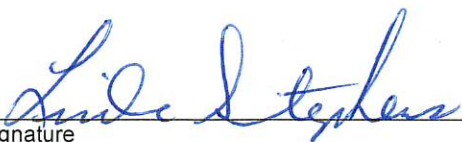
Telephone Number(s): 800-348-3705 x4

Fax Number(s):

Email Address: gnewton@petroleumtraders.com

Federal Identification Number: 35-1462227

Signature



4/25/2017
Date

Linda Stephens, Vice President
Printed Name and Title

By signing this document, the Bidder agrees to all terms and conditions of the ITB and the resulting agreement.

THE EXECUTION OF THIS FORM CONSTITUTES THE UNEQUIVOCAL OFFER OF BIDDER TO BE BOUND BY THE TERMS OF ITS BID. FAILURE TO SUBMIT THIS FORM EXECUTED BY AN AUTHORIZED REPRESENTATIVE WHERE INDICATED SHALL RENDER THE BID NON-RESPONSIVE. THE CITY MAY, HOWEVER, IN ITS SOLE DISCRETION, ACCEPT ANY BID THAT INCLUDES AN EXECUTED DOCUMENT WHICH UNEQUIVOCALLY BINDS THE BIDDER TO THE TERMS OF ITS BID.

Form 1 – Bid Submittal Signature Page (cont'd)
Signature Authority

Indicate below Bidder's type of organization and provide the required documentation as applicable to demonstrate that the executor of Bidder's Bid is duly authorized to execute on behalf of, and as the official act of, Bidder.

Select	Type of Organization	Officer Who Signed Proposal Submittal Signature Page	Required Authorizing Documentation
<input checked="" type="checkbox"/>	Corporation	President, Vice President, or Chief Executive Officer	None
<input type="checkbox"/>	Corporation	Director, Manager, or other title	Corporate resolution
<input type="checkbox"/>	Limited Liability Company (LLC) – Member-Managed	Member	Articles of Organization or Operating Agreement
<input type="checkbox"/>	Limited Liability Company (LLC) – Manager-Managed	Manager	Articles of Organization or Operating Agreement
<input type="checkbox"/>	Limited Partnership	General Partner	Document demonstrating the legal authority to bind the Limited Partnership
<input type="checkbox"/>	Partnership	Partner	None
		CEO, Director, Manager or other title	Authorizing documentation
<input type="checkbox"/>	Individual	Individual	None

☒ Documentation is not required.

Form 2 Public Entity Crimes


NOTIFICATION OF PUBLIC ENTITY CRIMES LAW

Pursuant to Section 287.133, *Florida Statutes*, you are hereby notified that a person or affiliate who has been placed on the convicted Bidders list following a conviction for a public entity crime may not submit a Bid on a Bidder to provide any goods or services to a public entity; may not submit a Bid on a Bidder with a public entity for the construction or repair of a public building or public work; may not submit Bids on leases or real property to a public entity; may not be awarded or perform work as a Bidder, supplier, sub-Bidder, or consultant under a Bidder with any public entity; and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017 [F.S.] for Category Two [\$35,000.00] for a period of thirty-six (36) months from the date of being placed on the convicted Bidders list.

Acknowledged by:

Petroleum Traders Corporation

Firm Name (print)



Signature

4/25/2017

Date

Linda Stephens, Vice President

Printed Name and Title

Form 3 Drug-Free Workplace

If identical tie bids exist, preference will be given to the vendors who submit a certification with their bid/Bid certifying they have a drug-free workplace in accordance with Section 287.087, Florida Statutes. The drug-free workplace preference is applied as follows:

IDENTICAL TIE BIDS: Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids which are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program.

As the person authorized to sign this statement, I certify that this firm complies fully with the following requirements:

- 1) This firm publishes a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- 2) This firm informs employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- 3) This firm gives each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
- 4) In the statement specified in subsection (1), this firm notifies the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- 5) This firm imposes a sanction on or requires the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
- 6) This firm will continue to make a good faith effort to maintain a drug-free workplace through implementation of this section.

Petroleum Traders Corporation

Firm Name (print)

Signature

4/25/17

Date

Linda Stephens, Vice President

Printed Name and Title

Form 4
Conflict of Interest Disclosure Form

The award of this ITB is subject to the provisions of Chapter 112, Florida Statutes and Palm Beach County Ordinance Section 2-443. All Bidders must disclose: the name of any officer, director, or agent who is also an employee or relative of an employee of the City.

Furthermore, all Bidders must disclose the name of any City employee or relative(s) of a City employee who owns, directly or indirectly, an interest in the Bidders firm or any of its branches.

The purpose of this disclosure form is to give the City the information needed to identify potential conflicts of interest for key personnel involved in the award of this ITB.

The term "conflict of interest" refers to situations in which financial or other personal considerations may adversely affect, or have the appearance of adversely affecting, an employee's professional judgment in exercising any City duty or responsibility in administration, management, instruction, research, or other professional activities.

Select the statement below which applies to Bidder and, if applicable attach supporting information:

☒ To the best of our knowledge, the undersigned firm has no potential conflict of interest as defined in Chapter 112, Florida Statutes and Section 2-443, Palm Beach County Code of Ordinances.

☐ The undersigned firm, by attachment to this form, submits information which may be a potential conflict of interest as defined in Chapter 112, Florida Statutes and Section 2-443, Palm Beach County Code of Ordinances.

Acknowledged by:

Petroleum Traders Corporation

Firm Name (print)



Signature

4/25/2017

Date

Linda Stephens, Vice President

Printed Name and Title

Disclose the name of any officer, director or agent of Bidder who is also an employee of the City. Disclose the name of any City employee who owns, directly or indirectly, any interest in the Bidder's firm or any of its branches. If no conflicts of interests exist enter N/A.

N/A

Form 5

Acknowledgment of Addenda

The Bidder hereby acknowledges the receipt of the following addenda, which were issued by the City and incorporated into and made part of this ITB. The Bidder acknowledges that it is solely responsible for ensuring that it is aware of, and in receipt of, all addenda.

ADDENDUM NUMBER	DATE RECEIVED
Addendum #1	March 24, 2017
Addendum #2	March 30, 2017
Addendum #3	April 11, 2017
Addendum #4	April 18, 2017

Petroleum Traders Corporation
Bidder (firm name)


Signature

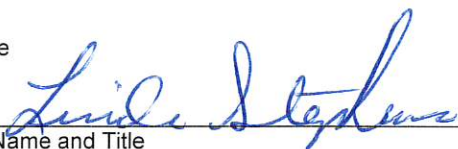
4/25/2017
Date

Linda Stephens, Vice President
Printed Name and Title

Form 7 - Byrd Anti-Lobbying Amendment

By signing below, Bidder confirms that it has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. 1352

Signature



Date

4/25/2017

Printed Name and Title

Linda Stephens, Vice President

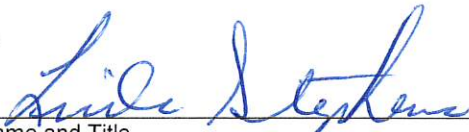
Printed Firm Name

Petroleum Traders Corporation

Form 8 – Debarment and Suspension

By signing below, Bidder confirms that it is **not** listed on the government wide exclusions in the System for Award Management (SAM), in accordance with the OMB guidelines at 2 CFR 180 that implement Executive Orders 12549 (3 CFR part 1986 Comp., p. 189) and 12689 (3 CFR part 1989 Comp., p. 235), "Debarment and Suspension."

Signature



Date

4/25/2017

Printed Name and Title

Linda Stephens, Vice President

Printed Firm Name

Petroleum Traders Corporation

Form 9 - Scrutinized Company Certification

ITB No. 2017-047
Bulk Gasoline and Diesel Fuel

This certification is required pursuant to Florida State Statute Section 287.135.

As of July 1, 2011, a company that, at the time of bidding or submitting a proposal for a new contract or renewal of an existing contract, is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List is ineligible for, and may not bid on, submit a proposal for, or enter into or renew a contract with an agency or local governmental entity for goods or services of \$1 million or more.

Companies must complete and return this form with its Bid.

Company. Petroleum Traders Corporation

FID or EIN No. 35-1462227

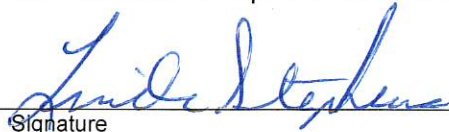
Address. 7120 Pointe Inventerness Way

Fort Wayne
City.

Indiana
State.

46804
Zip.

I, Linda Stephens, as a representative of Petroleum Traders Corporation certify and affirm that this company is not on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List.


Signature

Vice President
Title

Linda Stephens
Printed Name

4/25/2017
Date

Form 6 - Schedule of Pricing

Bidder Name: Petroleum Traders Corporation

A. PRICE: Bidder must submit pricing per the requirements and specification detailed in this ITB. Pricing submitted shall be a surcharge over the DTN FastRacks Average Price for each product at the time of delivery and shall include split loads. No other charges outside of the Fee Schedule shall be permitted.

NOTE: Only pricing submitted under Other Charges and Bid Item Nos. 1, 2, 8, and 9 will be utilized during the evaluation of bids.

a. Fee Schedule

i. Transport Truck Delivery

ITEM	DESCRIPTION	SURCHARGE AMOUNT
1	Gasoline 405-220-930-7800 Gasoline E10, Unleaded, 87 Octane	\$ <u>-0.0096</u> per gallon
2	Diesel 4405-120-260-1030 Ultra Low Sulfur Diesel Fuel, grade no. 2-D (.0015 mass % sulfur, minimum cetane index of 40)	\$ <u>+0.0131</u> per gallon
3	Other Fuel Type (specify) _____	\$ <u>NO BID</u> per gallon
4	Other Fuel Type (specify) _____	\$ <u>NO BID</u> per gallon
5	Other Fuel Type (specify) _____	\$ <u>NO BID</u> per gallon
6	Other Fuel Type (specify) _____	\$ <u>NO BID</u> per gallon
7	Other Fuel Type (specify) _____	\$ <u>NO BID</u> per gallon

ii. Tank Wagon Delivery

ITEM	DESCRIPTION	SURCHARGE AMOUNT
8	Gasoline 405-220-930-7800 Gasoline E10, Unleaded, 87 Octane	\$ <u>+0.125</u> per gallon
9	Diesel 4405-120-260-1030 Ultra Low Sulfur Diesel Fuel, grade no. 2-D (.0015 mass % sulfur, minimum cetane index of 40)	\$ <u>+0.125</u> per gallon
10	Other Fuel Type (specify) _____	\$ <u>NO BID</u> per gallon
11	Other Fuel Type (specify) _____	\$ <u>NO BID</u> per gallon
12	Other Fuel Type (specify) _____	\$ <u>NO BID</u> per gallon
13	Other Fuel Type (specify) _____	\$ <u>NO BID</u> per gallon
14	Other Fuel Type (specify) _____	\$ <u>NO BID</u> per gallon

iii. **Other Charges (if applicable)**

Delivery fees, pump off charges, etc.

ITEM	DESCRIPTION	UNIT PRICE	UNIT OF MEASURE
15	N/A	\$	
16		\$	
17		\$	
18		\$	
19		\$	
20		\$	
21		\$	

C. JOINT BIDDING, CO-OPERATIVE PURCHASING AGREEMENT: Will extend same price, terms, and conditions of this bid to other Palm Beach, Martin and Broward County Governmental agencies?

☒ Yes

☐ No

D. BID INFORMATION WAS OBTAINED FROM:

☒ BidSync

☐ Newspaper Ad

☐ City Hall

☐ City Website

☐ Other (specify) _____



PETRTRA-01

RENEER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/24/2016

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).

PRODUCER Lupke Rice Insurance & Financial Services 127 W. Berry Street, Ste 500 Fort Wayne, IN 46802	CONTACT NAME: Renee Riles	
	PHONE (A/C, No, Ext): 1918	FAX (A/C, No):
INSURED Petroleum Traders Corporation 7120 Pointe Inverness Way Fort Wayne, IN 46804	E-MAIL ADDRESS: rriles@lupkerice.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: HDI-Gerling America Insurance Co.	NAIC # 41343
	INSURER B: Certain Underwriters at Lloyd's	
	INSURER C: The North River Insurance Company	21105
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			EGGCD000194115	06/01/2016	06/01/2017	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 POLLUTION LIAB \$ Included
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			EAGCD000194115	06/01/2016	06/01/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			EXAGD000194115	06/01/2016	06/01/2017	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000 \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	EWGCD000194115	06/01/2016	06/01/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
B	Commercial Umbrella			TBD	06/01/2016	06/01/2017	INSURER B 5,000,000
C	Commercial Umbrella			TBD	06/01/2016	06/01/2017	INSURER C 5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

INFORMATION PURPOSES ONLY

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

© 1988-2014 ACORD CORPORATION. All rights reserved.