DATE (MM/DD/YYYY)
04/10/2012

ACORD CERTIFICATE OF LIABILITY INSURANCE							04/10/2012		
PRODUCER 775.827.3000 FAX 775.827.9131 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFO								ORMATION	
TSU Statson-Regger Treupance ONLY AND CONFERS NO RIGHTS UPON THE CERTIFIC								FICATE	
690 E. Plumb Lane, Suite 100  HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.									
Box 7236 .o, NV 89510					INSURERS AFFORDING COVERAGE			NAIC#	
INSURED South Tahoe Refuse Co.				INSURER A: F1	INSURERA: Financial Pacific Insurance Co			31453	
2140 Ruth St				INSURER B: In	INSURER B: Insurance Company of the West			27847	
		South Lake Tahoe, CA 961	150 ·	INSURER C:					
]				INSURER D:	INSURER D:				
					INSURER E:				
CO	COVERAGES								
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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.									
	ADD'I INSRII	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DDYYYYY)	LIMI	TS		
		GENERAL LIABILITY	175074F	04/10/2012	04/10/2013	EACH OCCURRENCE	\$	1,000,000	
1	]	X COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Es occurrence)	S	100,000	
		CLAIMS MADE X OCCUR	·			MED EXP (Any one person)	5	5,000	
A						PERSONAL & ADV INJURY	\$	1,000,000	
l						GENERAL AGGREGATE	\$	2,000,000	
		GENL AGGREGATE LIMIT APPLIES PER:			ļ	PRODUCTS - COMP/OP AGG	\$	1,000,000	
╙		POLICY PRO- X LOC					<del> </del>		
		X ANY AUTO	175074F	04/10/2012	04/10/2013	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
A		ALL OWNED AUTOS SCHEDULED AUTOS				80DILY INJURY (Per person)	\$		
^		X HIRED AUTOS NON-OWNED AUTOS		•		BODILY INJURY (Per accident)	\$		
6		X Physical Damage	•			PROPERTY DAMAGE (Per socideni)	\$		
F	$_{I}$	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	s		
1	1	ANY AUTO				OTHER THAN EA ACC	\$		
				•	1	OTHER THAN EA ACC	\$		
		EXCESS / UMBRELLA LIABILITY	922835F	04/10/2012	04/10/2013	EACH OCCURRENCE	\$	4,000,000	
	l	X OCCUR CLAIMS MADE				AGGREGATE	\$	4,000,000	
A		<u></u>				<u></u>	\$		
1		DEDUCTIBLE					\$		
		X RETENTION \$ 10,000					\$		
	AND	KERS COMPENSATION EMPLOYERS: LIABILITY Y/H	WLV500393202	04/01/2012	04/01/2013	X WC STATU- OTH ER	1_		
В	ANY	PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	!			E.L. EACH ACCIDENT	\$	1,000,000	
	1 (MAR	Zatory in NM) —— i			1	E.L. DISEASE - EA EMPLOYE	+	1,000,000	
-	SPEC	, describe under CIAL PROVISIONS below	3 9 9 9 7 4 5	04 (10 (2017	04/20/2022	E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
A	Pro	perty/Inland Marine	175074F		04/10/2013	Inland Marin			
DES	DESCRIPTION OF OPERATIONS! LOCATIONS! VEHICLES! EXCLUSIONS ADDED BY ENDORSEMENT! SPECIAL PROVISIONS Certificate Holder is named as additional insured(s) while acting within the scope of their duties that								
are	are controlled & supervised by the primary (first) additional insured. Primary Wording - when								
	endorsement applies, such insurance as is afforded by the general liability policy is primary								
		nce and other insurance					- •		
CERTIFICATE HOLDER				- 1	CANCELLATION				
					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION				
County of El Dorado, Its Officers,					DATE THEREOF, THE ISSUING INSURER WILL MAKEN MAIL *30 DAYS WRITTEN				
Employees, and Volunteers					NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, MONTAX MANAGEMENTS.				
		Department of Environme			NWKREWOCHTEX MENTATUREN OF WHICH HOWEVER HERRES (1979-1978)				
2850 Fairlane Court				NACK SEXXX	AUTHORIZED REPRESENTATIVE Starmer McCall				
		Placerville, CA 95667		AOTADRIZED RI	Melle 133	largene III	14/	rull	

ACORD 25 (2009/01)

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## **IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

#### DISCLAIMER

This Certificate of insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or after the coverage afforded by the policies listed thereon.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# ADDITIONAL INSURED -OWNERS, LESSEES OR CONTRACTORS (WITH LIMITED COMPLETED OPERATIONS COVERAGE)

This endorsement modifies insurance provided under the following: COMMERCIAL GENERAL LIABILITY COVERAGE PART BUSINESSOWNERS COVERAGE FORM

#### NAME OF PERSON OR ORGANIZATION:

Any person or organization to whom or to which the named insured is obligated by a virtue of a written contract to provide insurance that is afforded by this policy. Where required by contract the officers, officials, employees, directors, subsidiaries, partners, successors, parents, divisions, architects, surveyors and engineers are included as additional insureds. All other entities, including but not limited to agents. volunteers, servants, members and partnerships are included as additional insureds, if required by contract, only when acting within the course and scope of their duties controlled and supervised by the primary (first) additional insured. If an Owner Controlled Insurance Program is involved, the coverage applies to off-site operations only. If the purpose of this endorsement is for bid purposes only, then no coverage

#### WHO IS AN INSURED: (Section II)

This section is amended to include as an insured the person or organization shown on the Certificate of Insurance but only to the extent that the person or organization is held liable for your acts or omissions in the course of "your work" for that person or organization by or for you. The "products-completed operations hazard" portion of the policy coverage does not apply to any work involving or related to properties intended for residential or habitational occupancy (other than apartments).

#### **WAIVER OF SUBROGATION:**

We waive any right of recovery, when required by written contract, that we may have against the person or organization shown in the Certificate of Insurance because of payments we make for injury.

#### **LOCATION OF JOB:**

The job location must be within the State of domicile of the named insured, or within any contiguous State thereto.

## SCHEDULE DESCRIPTION OF WORK:

The type of work performed must be that as described under classifications in the CGL Coverage Part Declarations.

WAREHOUSES-NOC RECYCLING COLLECTION CENTERS CONTRACTORS PERM-YARD-MAINT/STORAGE GARBAGE/ASH/REFUSE COLLECTING RECYCLING COLLECTION CENTERS – NFP HOTELS/MOTELS-W/POOL, < 4 STORIES FOOD PROD

### PRIMARY CLAUSE:

When this endorsement applies and when required by written contract, such insurance as is afforded by the general liability policy is primary insurance and other insurance shall be excess and shall not contribute to the insurance afforded by this endorsement.

#### **EXCLUSION:**

The insurance provided to the additional insured does not apply to "bodily injury", "property Damage" or "personal and advertising injury" arising out of an architect's, engineer's or surveyor's rendering or failure to render any professional services, including:

- "The preparing, approving, or failing to prepare or approve, maps, designs, shop drawings, opinions, reports, surveys, field orders, change orders, or drawings and specifications; and
- 2. Supervisory, inspection, architectural or engineering activities.

Endorsement

EFFECTIVE DATE:

April 10, 2012

Endorsement

**EXPIRATION DATE:** 

April 10, 2013

G 20 10 Blanket Additional Insured 02 10R

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