

# ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID: OB  
SCOTT13

DATE (MM/DD/YYYY)  
03/20/09

**PRODUCER**  
Six & Geving Insurance Inc #4  
Denver Branch  
225 Union Blvd. #575  
Lakewood CO 80228  
Phone: 720-962-0930 Fax: 720-962-0942

**INSURED**  
Scott's Environmental  
Consulting Inc  
Scott O'Hara  
7651 E. Cornell Ave.  
Denver CO 80231

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.**

INSURERS AFFORDING COVERAGE		NAIC #
INSURER A:	American Safety Insurance	
INSURER B:	Owners Insurance Co.	18988
INSURER C:	Pinnacol Assurance	41190
INSURER D:		
INSURER E:		

## 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.

INSR	ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	X	X	<b>GENERAL LIABILITY</b>	ENV017717-08-02	11/15/08	11/15/09	EACH OCCURRENCE	\$ 1,000,000
			COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000
			CLAIMS MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/>				MED EXP (Any one person)	\$ 5,000
			<b>Professional -CM</b>				PERSONAL & ADV INJURY	\$ 1,000,000
			<b>Pollution Liab</b>	ENV017717-08-02	11/15/08	11/15/09	GENERAL AGGREGATE	\$ 1,000,000
			GEN'L AGGREGATE LIMIT APPLIES PER:	ENV017717-08-02	11/15/08	11/15/09	PRODUCTS - COMP/OP AGG	\$ 1,000,000
			<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
B			<b>AUTOMOBILE LIABILITY</b>	4745833300	11/15/08	11/15/09	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
			ANY AUTO <input type="checkbox"/>				BODILY INJURY (Per person)	\$
			ALL OWNED AUTOS <input type="checkbox"/>				BODILY INJURY (Per accident)	\$
			<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
			<input checked="" type="checkbox"/> HIRED AUTOS					
			<input checked="" type="checkbox"/> NON-OWNED AUTOS					
			<b>GARAGE LIABILITY</b>				AUTO ONLY - EA ACCIDENT	\$
			ANY AUTO <input type="checkbox"/>				OTHER THAN AUTO ONLY: EA ACC	\$
							AGG	\$
			<b>EXCESS/UMBRELLA LIABILITY</b>				EACH OCCURRENCE	\$
			<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
								\$
			DEDUCTIBLE					\$
			RETENTION \$					\$
C			<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>	4118957	11/01/08	11/01/09	WC STATUTORY LIMITS <input checked="" type="checkbox"/> OTH-ER	
			ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$ 1,000,000
			If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
			OTHER				E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS**  
J. Wallace Hall is named as additional insured on the general liability per policy terms and conditions.

## CERTIFICATE HOLDER

## CANCELLATION

JWALL-1

J. Wallace Hall & Associates  
18307 E. Alameda PL. Unit A  
Aurora CO 80017

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE  
*Rebecca A. Ostwick*

## **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**

The Certificate of Insurance on the reverse side of this form 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 alter the coverage afforded by the policies listed thereon.