1	1C	OR	D <sub>™</sub> CERTIFIC	CATEO	F LIABIL	ITY INS	TY INSURANCE			
PROI	DUCER	7.	nsurance Agent Name	& Address		ONLY AN HOLDER.	D CONFERS NOTHIS CERTIFICA	UED AS A MATTER OF RIGHTS UPON TATE DOES NOT AME	HE CERTIFICATE	
						INSURERS A	INSURERS AFFORDING COVERAGE		NAIC#	
INSU	RED		N. O.			INSURER A: Insuring Company				
Customer Name & Ad				Address		INSURER B: Ins	uring Company			
						INSURER C:	***************************************			
						INSURER D:				_
CO	/ED/	AGES				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.										
	ADD'L NSRD		TYPE OF INSURANCE	POLIC	YNUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIM	тѕ	
		GENER	RAL LIABILITY					EACH OCCURRENCE DAMAGE TO RENTED	\$	
		C	OMMERCIAL GENERAL LIABILITY			13		PREMISES (Ea occurence)	\$	
			CLAIMS MADE OCCUR		OK	V		MED EXP (Any one person)	\$	_
								RSONAL & ADV INJURY	\$	-
		GEN'L	AGGREGATE LIMIT APPLIES PER:		ar			ODUCTS - COMP/OP AGG	\$	
		P	OLICY PRO- JECT LOC							
Α	X	V	NY AUTO	POLICY	NUMBER	MM/DD/YY	MM/DD/YY	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,00	0
			LL OWNED AUTOS CHEDULED AUTOS					BODILY INJURY (Per person)	\$	
		Y	IRED AUTOS ON-OWNED AUTOS					BODILY INJURY (Per accident)	\$	
								PROPERTY DAMAGE (Per accident)	\$	
		GARAG	GE LIABILITY					AUTO ONLY - EA ACCIDENT	\$	
		A	NY AUTO					OTHER THAN EA ACC		
		EVOES	S/UMBRELLA LIABILITY					EACH OCCURRENCE	\$	_
			CCUR CLAIMS MADE			81		AGGREGATE	\$	_
									\$	
		D	EDUCTIBLE						\$	
		R	ETENTION \$						\$	
			OMPENSATION AND LIABILITY					WC STATU- TORY LIMITS ER	-	
ANY PROPRIETOR/PARTNER/EXECUTIVE			ETOR/PARTNER/EXECUTIVE					E.L. EACH ACCIDENT	\$	
OFFICER/MEMBER EXCLUDED?  If yes, describe under SPECIAL PROVISIONS below			e under		0	V		E.L. DISEASE - EA EMPLOYE  . DISEASE - POLICY LIMIT		_
В	OTHER			POLICY	UN E	M/LD/Y	NA)D YY	EQUIPMENT L		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL P. VISIONS										
ADDITIONAL INSURED AND WAIVER OF SUBROGATION PROVIDED ON AUTO LIABILITY POLICY AS REQUIRED BY WRITTEN CONTRACT. LOSS PAYEE PROVIDED ON EQUIPMENT POLICY AS REQUIRED BY WRITTEN CONTRACT.										
THE CONTROL OF WHAT I LIVE CONTROL OF THE CONTROL O										
CEF	RTIF	CATE	HOLDER		CANCELLATION					
							SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION			
WARREN POWER &					NERY, INC.			ER WILL ENDEAVOR TO MAIL	DATS WRITE	
DBA WARREN CAT								R NAMED TO THE LEFT, BUT I		
P.O. BOX 60662						REPRESENTATI		TY OF ANY KIND UPON THE I	NOUKER, ITS AGENTS O	K
MIDLAND, TX 79711				1		AUTHORIZED REI				
ACORD 25 (2001/08)								© ACORD C	ORPORATION 198	88

## **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.