



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/02/2013

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 Willis Insurance Services of Georgia, Inc. c/o 26 Century Blvd. P. O. Box 305191 Nashville, TN 37230-5191 | CONTACT NAME: PHONE (A/C, NO, EXT): 877-945-7378 FAX (A/C, NO): 888-467-2378 E-MAIL ADDRESS: certificates@willis.com | |
| | INSURER(S) AFFORDING COVERAGE INSURER A: Liberty Mutual Fire Insurance Company NAIC # 23035-001 INSURER B: Lexington Insurance Company 19437-002 INSURER C: Liberty Mutual Insurance Company 23043-000 INSURER D: American Guarantee & Liab. Ins. Co. 26247-001 INSURER E: INSURER F: | |
| INSURED Waste Pro USA, Inc. 2101 W State Road 434 Longwood, FL 32779 | | |

COVERAGES **CERTIFICATE NUMBER: 19215982** **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 | ADD'L INSR | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | | | |
|----------|--|---|----------|-----------------|-------------------------|-------------------------|---|--|--|------------------------------------|
| A | GENERAL LIABILITY | | | TB2621093780102 | 11/22/2012 | 11/22/2013 | EACH OCCURRENCE \$ 1,000,000 | | | |
| | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 | | | |
| | <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR | | | | | | MED EXP (Any one person) \$ 5,000 | | | |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | | | | | PERSONAL & ADV INJURY \$ 1,000,000 |
| | <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | | | | | | | | | GENERAL AGGREGATE \$ 2,000,000 |
| | | | | | | | PRODUCTS - COMP/OP AGG \$ 2,000,000 | | | |
| | | | | | | | \$ | | | |
| A | AUTOMOBILE LIABILITY | | | AS2621093780092 | 11/22/2012 | 11/22/2013 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 | | | |
| | <input checked="" type="checkbox"/> ANY AUTO | | | | | | BODILY INJURY (Per person) \$ | | | |
| | <input type="checkbox"/> ALL OWNED AUTOS | <input type="checkbox"/> SCHEDULED AUTOS | | | | | BODILY INJURY (Per accident) \$ | | | |
| | <input checked="" type="checkbox"/> HIRED AUTOS | <input checked="" type="checkbox"/> NON-OWNED AUTOS | | | | | PROPERTY DAMAGE (Per accident) \$ | | | |
| | | | | | | | \$ | | | |
| B | UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR | | | 018423515 | 11/22/2012 | 11/22/2013 | EACH OCCURRENCE \$ 5,000,000 | | | |
| | <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE | | | | | | AGGREGATE \$ 5,000,000 | | | |
| | <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ | | | | | | \$ | | | |
| C | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | | WA562D093780042 | 11/22/2012 | 11/22/2013 | <input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER | | | |
| C | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | Y/N <input type="checkbox"/> | N/A | EW562N093780052 | 11/22/2012 | 11/22/2013 | E.L. EACH ACCIDENT \$ 1,000,000 | | | |
| | | | | | | | E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 | | | |
| | | | | | | | E.L. DISEASE - POLICY LIMIT \$ 1,000,000 | | | |
| D | Excess Liability | | | AEC585211600 | 11/22/2012 | 11/22/2013 | \$20,000,000 Limit | | | |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach Acord 101, Additional Remarks Schedule, if more space is required)
 See attached for Pollution Liability coverage and additional information:

| | |
|--|--|
| CERTIFICATE HOLDER Manatee County Utilities Department Solid Waste Division Attn: Jeanne' Detweiler 3333 Lena Road Bradenton, FL 34211 | 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 |
|--|--|



ADDITIONAL REMARKS SCHEDULE

| | | | |
|--|-----------|---|--|
| AGENCY Willis Insurance Services of Georgia, Inc. | | NAMED INSURED Waste Pro USA, Inc. 2101 W State Road 434 Longwood, FL 32779 | |
| POLICY NUMBER See First Page | | EFFECTIVE DATE: See First Page | |
| CARRIER See First Page | NAIC CODE | | |

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
 FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

Pollution Liability
 Carrier: Chartis Specialty Insurance Company / NAIC 26883-003
 Policy Number: PLC1959416
 Policy Term: 01/01/2013 - 01/01/2014
 \$25,000,000 Limit
 \$ 25,000 Deductible

Named Insured includes: Waste Pro of AL Inc., Waste Pro of FL Inc., Waste Pro of GA Inc., Waste Pro of LA Inc., Waste Pro of MS Inc., Waste Pro of Memphis LLC, Waste Pro of NC Inc., Waste Pro of SC Inc., Applecourt Holdings LLC, Applecourt Land Holdings LLC, Applewhite Recycling Systems LLC, American Recycling of Georgia, American Recycling of Birmingham, Delta Sanitation LLC, Talley Disposal LLC