R

SAMPLE CERTIFICATE OF INSURANCE

THE PROCEDURES OUTLINED BELOW MUST BE FOLLOWED IN ISSUING THE REQUIRED CERTIFICATE OF INSURANCE:
1) THE ACORD CERTIFICATE OF INSURANCE FOR IS THE ONLY FORM WHICH WILL BE ACCEPTED.
2) THE ATTACHED SAMPLE ACORD CERTIFICATE OF INSURANCE FORM SHOWS MINIMUM COVERAGE AND LIMITS TO BE CERTIFIED AS REQUIRED BY YOUR SUBCONTRACT AGREEMENT OR THE PROJECT SPECIFICATIONS AND AS INDICATED BELOW.

ACORD™ CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

PRODUCER	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.

COMPANIES AFFORDING COVERAGE

INSURER	A	At least an A- Rated Insurance Carrier
INSURER	B	At least an A- Rated Insurance Carrier
INSURER	C	At least an A- Rated Insurance Carrier
INSURER	D	At least an A- Rated Insurance Carrier
INSURER	E	

INSURED

PHONE NO. A/C

COVERAGES

THE POLOCIES 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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	**GENERAL LIABILITY**	POLICY NUMBER			EACH OCCURRENCE	$ 1,000,000
	X COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISE (occur.)	$ 100,000
	CLAIMS MADE X OCCURRENCE				MEDICAL EXPENSE (ANY ONE PERSON)	$ 5,000
					PERSONAL & ADV INJURY	$ 1,000,000
					GENERAL AGGREGATE	$ 2,000,000
					PRODUCTS-COMP/OP AGG	$ 2,000,000
	GENERAL AGGREGATE LIMIT APPLIES PER: POLICY X PROJECT LOCATION					
B	**AUTOMOBILE LIABILITY**	POLICY NUMBER			COMBINED SINGLE LIMIT (EACH ACCIDENT)	$1,000,000
	X ANY AUTO					
	ALL OWNED AUTOS				BODILY INJURY (PER PERSON)	
	SCHEDULED AUTOS					
	HIRED AUTOS				BODILY INJURY (PER ACCIDENT)	
	NON-OWNED AUTOS					
	GARAGE LIABILITY				PROPERTY DAMAGE (PER ACCIDENT)	
	X THE CERTIFICATE HOLDER HAS BEEN ADDED AS AN ADDITIONAL INSURED ON THIS COVERAGE					
D	**EXCESS LIABILITY**	POLICY NUMBER			EACH OCCURRENCE	$1,000,000
	X OCCURRENCE				AGGREGATE	$1,000,000
	OTHER THAN UMBRELLA FORM					
	RETENTION $					
C	**WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY**	POLICY NUMBER			X STATUTORY LIMITS	
	ANY PROPRIETOR/PARTNER/EXECUTIVE				EACH ACCIDENT	$500,000
	OFFICER/MEMBER EXCLUDED Y/N				DISEASE - POLICY LIMIT	$500,000
	If yes, describe under SPECIAL PROVISIONS below.				DISEASE - EACH EMPLOYEE	$500,000
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

Straub Construction Co., Inc. is added as an additional insured on all policies except workers compensation on a primary and noncontributory basis including completed operations coverage. Waiver of subrogation in favor of Straub Construction Co. Inc. where permissible by law.

CERTIFICATE HOLDER	CANCELLATION
Straub Construction Co., Inc. 7775 Meadow View Drive Shawnee, KS 66227	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