



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/20/2020

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 have ADDITIONAL INSURED provisions or 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 Hugh Wood Inc, New York 45 Broadway New York NY 10006	CONTACT NAME: PHONE (A/C No. Ext): 212-509-3777		FAX (A/C, No): 212 480 9825
	E-MAIL ADDRESS: insurance@hughwood.com		
INSURER(S) AFFORDING COVERAGE			NAIC #
INSURED Clean Water of New York Inc. William J. Lauer Corp. 3249 Richmond Terrace P.O. Box 030312 Staten Island NY 10303-0312	CLEAWAT-01		INSURER A: Great American Insurance Company 16691
			INSURER B: U S Specialty Insurance Co 29599
			INSURER C: Manufacturers Alliance Insurance Company 36897
			INSURER D: Ironshore Specialty Ins Co 25445
			INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 531737606

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	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			OMH797750822	4/19/2020	4/19/2021	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 1,000,000
								\$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			CAP429160709	4/19/2020	4/19/2021	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			CXS10981.040	4/19/2020	4/19/2021	EACH OCCURRENCE	\$ 9,000,000
							AGGREGATE	\$ 9,000,000
								\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	0879395Y	4/19/2020	4/19/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
D	Pollution Liability Contractor Pollution			003131703	4/19/2020	4/19/2021	Each Occurrence	\$ 1,000,000
							Each Occurrence	\$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Evidence of Insurance

CERTIFICATE HOLDER**CANCELLATION**

Evidence of Insurance

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

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ADDITIONAL REMARKS SCHEDULE

AGENCY Hugh Wood Inc.	NAMED INSURED Clean Water of New York Inc. William J. Lauer Corp. 3249 Richmond Terrace Staten Island, NY 10303
POLICY NUMBER SEE PAGE 1	EFFECTIVE DATE: SEE PAGE 1
CARRIER SEE PAGE 1	NAIC CODE SEE P 1

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
 FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

ADDITIONAL INSURERS / COVERAGES

Worker's Comp. and USL&H coverages EXCLUDE Patriot Environmental.

USL&H Coverage Provided by American Longshore Mutual Association Ltd (ALMA)
 Policy Period: 4/19/20 to 4/19/21
 Certificate Number: ALMA 01746-04

Ironshore General Liability & Pollution Policy No. 003131703 includes the following limits:

GENERAL LIABILITY

General Aggregate: \$2,000,000
 Products-Completed Operations Aggregate Limit: \$2,000,000
 Personal & Advertising Injury Limit: \$1,000,000
 Each Occurrence Limit: \$1,000,000
 Employee Benefits Liability \$1,000,000
 Damage to Premises Rented to You Limit: \$500,000
 Medical Expense Limit: \$25,000

POLLUTION LIABILITY

\$1,000,000 Each Incident Site Pollution
 \$1,000,000 Each Occurrence Transported Cargo
 \$1,000,000 Each Occurrence Products
 \$1,000,000 Each Occurrence Non-Owned Site
 \$1,000,000 Each Occurrence Contractor Pollution Liability
 \$1,000,000 Each Incident Professional Liability

Protection & Indemnity including vessel Pollution Liability: West of England Ship Owners Mutual – Policy No. M2020/1616 - 02/20/20 to 02/20/21

Protection & Indemnity Limit: Excess of \$2,000,000,000
 Pollution Liability Limit: \$1,000,000,000

Protection & Indemnity: Insurer A – Policy No. OMH 429788904 – 04/19/20 to 04/19/21
 Protection & Indemnity Limit: \$1,000,000

Hull & Machinery: Insurer A – Policy No. OMH 549875014 – 04/19/20 to 04/19/21

Vessel Pollution Liability: Insurer A – Policy No. OMH 350066705 – 04/19/20 to 04/19/21
 Pollution Liability Limit: \$5,000,000

2nd Layer Bumbershoot Policy No. B5JH02757 – Atlantic Specialty Insurance Co. – 4/19/20 to 04/19/21
 Limit of Liability: \$4,000,000 Excess 1st Layer Bumbershoot