



Resource Recovery Program
 PO Box 24055, MS 702
 Oakland, CA 94623-1055
 (510) 287-1632
RRInsure@EBMUD.com
www.ebmud.com/wastewater/commercial-waste/trucked-waste

CERTIFICATE OF POLLUTION LIABILITY INSURANCE

THIS IS TO CERTIFY TO:	East Bay Municipal Utility District (EBMUD) Department: <u>Wastewater Department, Environmental Services Division</u> Street Address: <u>375 11th Street, MS 702</u> Mailing Address: <u>P.O. Box 24055</u> City, State, Zip: <u>Oakland, CA 94623-1055</u>
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THE FOLLOWING DESCRIBED POLICY HAS BEEN ISSUED TO:

District Account Number: (Completed by EBMUD)

Insured: _____

Address: _____

LOCATION AND DESCRIPTION OF PROJECT/AGREEMENT:

Trucked non-hazardous waste permitted for disposal at designated EBMUD Wastewater Treatment facilities

TYPE OF INSURANCE: Pollution Liability (Claims Made Basis)

MINIMUM LIMITS OF LIABILITY: \$2,000,000 each claim - \$2,000,000 aggregate

INSURANCE COMPANY: _____

POLICY NUMBER: _____

POLICY TERM: From: _____ To: _____

POLICY TAIL: From: _____ To: _____

The policy will not be canceled nor the above coverage reduced without 30 days written notice to East Bay Municipal Utility District at the address above.

IT IS HEREBY CERTIFIED the above policy provides insurance as required by the agreement between East Bay Municipal Utility District and the Insured.

Signed: _____
Authorized Signature of Broker, Agent, or Underwriter

Date: _____

Firm: _____

Address: _____

Phone: _____

E-mail: _____

"This certificate or verification of insurance is not an insurance policy and does not amend, extend, or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term or conditions of any contract or other document with respect to which this certificate or verification or insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of the policies."