



RAILROAD COMMISSION OF TEXAS

Gas Services Division
License & Permit Section

CERTIFICATE OF INSURANCE
GENERAL LIABILITY

Please indicate type of fuel
LPG___ CNG___ LNG___

(Name of Insurance Company; TDI No.; and NAIC No.)

Located at: (Home Office Address of Insurance Company)

certifies that insurance coverage as indicated below is being provided to:

(Licensee's Name as it appears on the license) (License No.)

(Mailing Address of Licensee)

General liability insurance is being provided by the insurance company named above in the amount specified in §9.26(a), Table 1, of the LP-Gas Safety Rules (Tex. Admin. Code Chapter 9); §13.62(a), Table 1, of the Regulations for Compressed Natural Gas (CNG) (16 Tex. Admin. Code Chapter 13); or §14.2031(a), Table 1, of the Regulations for Liquefied Natural Gas (LNG) (16 Tex. Admin. Code Chapter 14). CHECK ONE:

Amount stated in the policy, but not less than \$25,000 per occurrence, with a \$50,000 policy aggregate (LPG License Categories: D, F, I, G, L, M, N, K, P; CNG License Categories: 2, 5, 6; LNG License Categories: 30, 40, 45).

Amount stated in the policy, but not less than \$300,000 per occurrence, with a \$300,000 policy aggregate (LPG License Categories H and J).

Amount stated in the policy, but not less than \$300,000 per occurrence, with a \$300,000 policy aggregate; including completed operations and products liability coverage with a \$300,000 policy aggregate (LPG License Categories: A, B, C, E, O; CNG License Categories: 1, 3, 4; LNG License Categories: 15, 20, 25, 35, 50).

Policy Number is effective from (Start Date) to (End Date).

Signed at this day of, 20. (County and State)

Printed Name of Insurance Company

Printed Name of Insurance Company's Authorized Representative

Signature of Insurance Company's Authorized Representative

Return to: Railroad Commission of Texas License and Permit Section PO Box 12967 Austin, TX 78711-2967

Website: www.rrc.state.tx.us Phone (512) 463-6931 Fax (512) 463-8111