CERTIFICATE OF INSURANCE

(SAMPLE ONLY)

ISSUE DATE(MM/DD/YY)
2/30/98

PRODUCER:

All American Insurance Agency
123 Main Street
Anywhere, Utah 84000

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER THIS CERTIFICATE DOES NOT AMEND OR EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW

COMPANIES AFFORDING COVERAGE

COMPANY LETTER A RELIANCE NATL RISK SPECIALIST

INSURED:

Expert Construction Co., Inc.
456 1st Avenue
Somewhere, Utah 84000

COMPANY LETTER B UTAH PROP & LIAB INS CO

COMPANY LETTER C "ALL RISK" INSURANCE CO

COMPANY LETTER D

COMPANY LETTER E

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOT WITHSTANDING ANY REQUIREMENT, TERM OF 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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS	
A	GENERAL LIABILITY [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS MADE [X] OCCUR [ ] OWNER'S & CONTRACTOR'S [ ] CONTRACT, LIAB. X,C,U COVERAGE	123JA4568 AGGREGATE APPLIES PROJECT	1/01/91	1/01/91	GENERAL AGGREGATE PRODUCTS COMP/OPS AGGREGATE PERSONAL & ADVERTISING INJURY EACH OCCURRENCE FIRE DAMAGE(ANY ONE FIRE) MEDICAL EXPENSE(ANY ONE PERSON)	$ 1,000 $ 1,000 $ 1,000 $ 1,000 $ 100 $ 1
A	AUTOMOBILE LIABILITY [X] ANY AUTO [ ] ALL OWNED AUTOS [ ] SCHEDULED AUTOS [X] HIRED AUTOS [X] NON-OWNED AUTOS [ ] GARAGE LIABILITY	123AB4568	1/01/91	1/01/91	COMBINED SINGLE UNIT BODILY INJURY (PER PERSON) BODILY INJURY (PER PERSON) PROPERTY DAMAGE	$ 1,000 $ N/A $ N/A $ N/A
B	EXCESS LIABILITY [X] UMBRELLA FORM [ ] OTHER THAN UMBRELLA FORM	456XY789	1/01/90	1/01/91	EACH OCCURRENCE $1000	AGGREGATE $1000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	3456 SW C 45 STATE OF UTAH	1/01/90	1/01/91	STATUTORY $ 100 (EACH ACCIDENT) $ 500 (DISEASE POLICY LIMIT) $ 100 (DISEASE EACH EMPLOYEE)	
C	OTHER INSTALLATION FLOATER & BUILDERS RISK	4J6BR386 *BROAD FORM*	1/01/90	1/01/91	1,500,000 LIMIT 5,000 DEDUCTIBLE	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS

ABC COMPANY, INC. IS ADDED AS ADDITIONAL INSURED AS RESPECTS GENERAL LIABILITY AND UMBRELLA LIABILITY BUT ONLY AS RESPECTS (Contractor's Name) WORK AT PROJECT KNOWN AS (Project Name).

CERTIFICATE HOLDER

ABC COMPANY, INC.
ATTN: John Smith, President
7000 East Mystreet
Mytown, Utah 84000

CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL xxxxxxxxxxxxxxx
MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFTxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx

AUTHORIZED REPRESENTATIVE