

Your Insurance Company
Insurance Co. Address

SAMPLE FOR BEJAC CORPORATION
INSURANCE IS REQUIRED FOR ALL RENTAL ACCOUNTS

The following described policies in the name of:
have been issued by the company with respect to the coverages, and limits
of liability indicated by specific entry herein.

Named Insured and Address

Your Company Name

TYPE OF COVERAGE	POLICY PERIOD	POLICY NUMBER	LIMITS
General Liability ___ Commercial General Liability ___ Claims Made ___ Occurrence ___ Owner's & Contractor's Prof.	Eff. 01/01/13 Exp. 01/01/14	CPP0553216	General Aggregate \$ 1,000,000 Products-Comp/Ops Aggregate \$ 1,000,000 Personal & Advertising Injury \$ 500,000 Each Occurrence \$ 500,000 Fire Damage (Any one fire) \$ 50,000 Medical Expense \$ 5,000
Automobile Liability ___ Any Auto ___ All Owned Autos ___ Scheduled Autos ___ Hired Autos ___ Non-Owned Autos ___ Garage Liability	Eff. Exp. Eff. Exp.		Business Auto - Combined Single Limit Per Accident \$ Garage Operations Auto Only Per Accident \$ Garage Operations Other Than Auto Only Per Accident \$
Excess Liability ___ Umbrella Form ___ Other Than Umbrella	Eff. Exp.		Each Occurrence \$ General Aggregate \$ Products-Comp/Ops Aggregate \$
Workers' Compensation and Employers' Liability	Eff. Exp.		Statutory Limits \$ Each Accident \$ Disease - Policy Limit \$ Disease - Each Employee \$
Other Leased/Rented Equipment	Eff. 1/01/13 Exp. 1/01/14		**Coverage required should be the value of the equipment rented**

Description of Operations/Locations/Vehicles/Restrictions/Special Items

Certificate Holder is named additional Insured with respect to liability and Loss payee with respect to leased, rented or borrowed equipment.

IN THE EVENT OF CANCELLATION OF SAID POLICIES BY THE COMPANY, THE COMPANY WILL ENDEAVOR TO GIVE 30 DAYS WRITTEN NOTICE TO THE PARTY TO WHOM THE CERTIFICATE IS ISSUED, AT THE ADDRESS SHOWN HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

Countersignature (If Required);

(Authorized Representative)

Bejac Corporation 569 S. Van Buren St. Placentia, CA 92870
--

DATE ISSUED _____