OP ID: RM

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/19/2018

ACORD

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(les) 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).

this certificate does not confer rights to the certificate holder in lieu		Statement on			
PRODUCER 502-228-8831	CONTACT Michael Ash				
Ash Group, LLC P.O. Box 706	PHONE (A/C, No, Ext): 502-228-8831 FAX (A/C, No): 502	-228-9994			
Prospect, KY 40059 Michael Ash	E-MAIL ADDRESS: Michael@ashgroup.us.com				
MICHAEL ASII	INSURER(S) AFFORDING COVERAGE	NAIC#			
	INSURER A : Great American Ins. Co.	16691			
INSURED Nugent Sand Company & Affiliated Companies	INSURER B : Environmental Pollution Group				
Mr. Joey Griesbeck	INSURER C : Starr Indemnity & Liability Co				
P.O. Box 6072	INSURER D : Endurance American Co.	10641			
Louisville, KY 40206	INSURER E : Navigators Insurance Co.	42307			
	INSURER F:				
COVERAGES CERTIFICATE NUMBER:	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,					

	INSURER F:						
CO	COVERAGES CERTIFICATE NUMBER: 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 SUE	POLICY NUMBER	POLICY EFF	POLICY EXP	LIMIT	S
A	X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR		OMH4016222	09/30/2017	09/30/2018	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 100,000
		-	MARINE GENERAL LIABILITY			MED EXP (Any one person) PERSONAL & ADV INJURY	s 10,000 s 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER	-				GENERAL AGGREGATE	s 2,000,000
	POLICY PRO- LOC					PRODUCTS - COMPAOP AGG	s 1,000,000
В	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	s 1,000,000
	X ANY AUTO OWNED SCHEDULED AUTOS ONLY AUTOS		CAP4843403	09/30/2017	09/30/2018	BODILY INJURY (Per person)  BODILY INJURY (Per accident)	\$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	s
	V V		<del>                                     </del>	1			25,000,000
٦	X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MAD	_	BUMBERSHOOT - SEE NOTE	09/30/2017 09/30/	09/30/2018	EACH OCCURRENCE	25,000,000
	DED X RETENTION\$ 2500		DOMIDERS/1001 - SEE NOTE			AGGREGATE Endurance	\$ 25,000,000 Lead
Α	AND EMPLOYERS' LIABILITY		WC400134303	09/30/2017	09/30/2018	X PER OTH-	s 1,000,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?					E L EACH ACCIDENT  E L DISEASE - EA EMPLOYEE	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	4 000 000
Α	Equipment Floater		OMH4016222	09/30/2017	09/30/2018	Scheduled	
DESCRIPTION OF OPERATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space in required)  Evidence of Coverage							

CERTIFICATE HOLDER	CANCELLATION		
	LFUCKY1		
		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCI	

LFUCG Risk Mgmt WL Wilson 4th Floor 200 E. Main St. Lexington, KY 40507-1310 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

Michael Alsh

NOTEPAD

## **Nugent Sand Company** INSURED'S NAME

NUGEN-1 OP ID: RM

PAGE 2 Date 03/19/2018

COVERAGES: Bumbershoot
Insurer: Endurance Insurance 50% LEAD & Starr Indemnity & Liability 50%
Policy #: OMX1000993601 & MASIL00016417
Policy Term: September 30, 2017 - 2018
Limit: \$25,000,000 excess \$1,000,000 Primary Liability Limits &
\$25,000,000 excess Vessel Pollution Coverage
Detail: All Coverage's subject to policy terms & conditions