

#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/3/2024

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(ies) 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).

|  | <b>5</b>                       | (-)  |                           |        |  |
|--|--------------------------------|--|---------------------------|--------|--|
| PRODUCER Acrisure Partners West Coast Ins      | urana Sanjaga II C             | CONTACT<br>NAME: Jeremy Ervin                      |                           |        |  |
| 1950 W Corporate Way #1                        | surance Services, LLC          | PHONE<br>(A/C, No, Ext): 707-308-2648              | FAX<br>(A/C, No): 707-546 | 6-2915 |  |
| Anaheim CA 92801                               |                                | E-MAIL<br>ADDRESS: certs@vantreo.com               |                           |        |  |
|  |                                | INSURER(S) AFFORDING COVERAGE                      |                           | NAIC#  |  |
|  | License#: 6009644              | INSURER A: AIG Specialty Insurance Company         |                           | 26883  |  |
| INSURED  | CARBACT-01                     | INSURER B: National Union Fire Ins Co of Pittsburg | 19445                     |        |  |
| Carbon Activated Corp.<br>2250 S. Central Ave. |                                | INSURER C: Chartis Property Casualty Company       |                           | 19402  |  |
| Compton CA 90220-5603                          |                                | INSURER D:   |                           |        |  |
|  |                                | INSURER E :  |                           |        |  |
|  |                                | INSURER F:   |                           |        |  |
| COVERACES                                      | CERTIFICATE NUMBER, 44400C4047 | DEVICION NUM                                       | ADED.                     |        |  |

#### CERTIFICATE NUMBER: 1449964817 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,

| E           | EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. |              |             |               |                            |                            |   |                            |
|-------------|--|--------------|-------------|---------------|----------------------------|----------------------------|---|----------------------------|
| INSR<br>LTR | TYPE OF INSURANCE  | ADDL<br>INSD | SUBR<br>WVD | POLICY NUMBER | POLICY EFF<br>(MM/DD/YYYY) | POLICY EXP<br>(MM/DD/YYYY) | LIMITS  |                            |
| А           | X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR  | Υ            | Y           | EG23010373    | 10/31/2023                 | 10/31/2024                 | EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 1,000,000<br>\$ 300,000 |
|             | X 25,000 Ded   |              |             |               |                            |                            | MED EXP (Any one person)                                  | \$ 25,000                  |
|             |  |              |             |               |                            |                            | PERSONAL & ADV INJURY                                     | \$1,000,000                |
|             | GEN'L AGGREGATE LIMIT APPLIES PER:   |              |             |               |                            |                            | GENERAL AGGREGATE   | \$2,000,000                |
|             | POLICY X PRO-  |              |             |               |                            |                            | PRODUCTS - COMP/OP AGG                                    | \$ 2,000,000               |
|             | OTHER:   |              |             |               |                            |                            | Pollution Legal   | \$ 1,000,000               |
| В           | AUTOMOBILE LIABILITY   | Υ            | Υ           | 016026358     | 10/31/2023                 | 10/31/2024                 | COMBINED SINGLE LIMIT (Ea accident)                       | \$1,000,000                |
|             | X ANY AUTO   |              |             |               |                            |                            | BODILY INJURY (Per person)                                | \$                         |
|             | OWNED SCHEDULED AUTOS  |              |             |               |                            |                            | BODILY INJURY (Per accident)                              | \$                         |
|             | X HIRED X NON-OWNED AUTOS ONLY   |              |             |               |                            |                            | PROPERTY DAMAGE (Per accident)                            | \$                         |
|             |  |              |             |               |                            |                            |   | \$                         |
| Α           | UMBRELLA LIAB X OCCUR  |              |             | EGU 23010374  | 10/31/2023                 | 10/31/2024                 | EACH OCCURRENCE   | \$5,000,000                |
|             | X EXCESS LIAB CLAIMS-MADE  |              |             |               |                            |                            | AGGREGATE   | \$5,000,000                |
|             | DED RETENTION \$   |              |             |               |                            |                            |   | \$                         |
|             | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  |              |             |               |                            |                            | PER OTH-<br>STATUTE ER                                    |                            |
|             | ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?                                       | N/A          |             |               |                            |                            | E.L. EACH ACCIDENT  | \$                         |
|             | (Mandatory in NH)  |              |             |               |                            |                            | E.L. DISEASE - EA EMPLOYEE                                | \$                         |
|             | If yes, describe under DESCRIPTION OF OPERATIONS below   |              |             |               |                            |                            | E.L. DISEASE - POLICY LIMIT                               | \$                         |
| С           | Pollution Liability  |              |             | EG23010373    | 10/31/2023                 | 10/31/2024                 | Each Loss Claims Made                                     | 1,000,000                  |
|             |  |              |             |               |                            |                            |   |                            |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) INVITATION TO BID #141-2024 East Hickman Pump Station Activated Carbon Replacement & Calibration

Lexington-Fayette Urban County Government is included as Additional Insured when required by written contract with regards to Auto Liability and General Liability on a Primary and Non-Contributory basis per the attached endorsements. Waiver of Subrogation applies per attached endorsements. Thirty (30) days' notice of cancellation is provided to the Certificate Holder. Umbrella Liability is follow form over General

Liability and Auto Liability. Pollution Liability includes Transportation Liability and Product Pollution Liability.

| CERTIFICATE HOLDER CAN | NCELLATION |
|------------------------|------------|
|------------------------|------------|

Lexington-Fayette Urban County Government Attn: Brian Marcum 200 East Main Street Lexington KY 40507

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

#### **ENDORSEMENT**

This endorsement, effective 12:01 A.M. October 31, 2023 forms a part of

policy No. 016026358 issued to Carbon Activated Corporation

by National Union Fire Insurance Company of Pittsburgh

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

#### ADDITIONAL INSURED - WHERE REQUIRED UNDER CONTRACT OR AGREEMENT

This endorsement modifies insurance provided under the following:

**BUSINESS AUTO COVERAGE FORM** 

#### **SCHEDULE**

#### **ADDITIONAL INSURED:**

Any Person or Organization as required by written contract

- I. SECTION II LIABILITY COVERAGE, A. Coverage, 1. Who Is Insured, is amended to add:
  - d. Any person or organization, shown in the schedule above, to whom you become obligated to include as an additional insured under this policy, as a result of any contract or agreement you enter into which requires you to furnish insurance to that person or organization of the type provided by this policy, but only with respect to liability arising out of use of a covered "auto". However, the insurance provided will not exceed the lesser of:
    - (1) The coverage and/or limits of this policy, or
    - (2) The coverage and/or limits required by said contract or agreement.

Authorized Representative or Countersignature (in States Where Applicable)

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POLICY NUMBER: 016026358

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (WAIVER OF SUBROGATION)

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM BUSINESS AUTO COVERAGE FORM MOTOR CARRIER COVERAGE FORM

Named Insured: Carbon Activated Corporation

Endorsement Effective Date: 10/31/2023

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

| Endorsoment Endouve Date. 10/01/2020  |
|---|
| SCHEDULE  |
| Name(s) Of Person(s) Or Organization(s):  |
| Any person or Organization as required by written contract  |
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| Information required to complete this Schedule, if not shown above, will be shown in the Declarations |

The Transfer Of Rights Of Recovery Against Others To Us condition does not apply to the person(s) or organization(s) shown in the Schedule, but only to the extent that subrogation is waived prior to the "accident" or the "loss" under a contract with that person or organization.

#### **ENDORSEMENT**

This endorsement, effective 12:01A.M.

forms a part of

policy No. 016026358

issued to Carbon Activated Corporation

by National Union Fire Insurance Company of Pittsburgh

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

#### **INSURANCE PRIMARY AS TO CERTAIN ADDITIONAL INSUREDS**

This endorsement modifies insurance provided under the following:

**BUSINESS AUTO COVERAGE FORM** 

Section IV - Business Auto Conditions, B., General Conditions, 5., Other Insurance, c., is amended by the addition of the following sentence:

The insurance afforded under this policy to an additional insured will apply as primary insurance for such additional insured where so required under an agreement executed prior to the date of accident. We will not ask any insurer that has issued other insurance to such additional insured to contribute to the settlement of loss arising out of such accident.

All other terms and conditions remain unchanged.

This endorsement, effective 12:01 AM, October 31, 2023

Forms a part of Policy No.: EG 23010373

Issued to: CARBON ACTIVATED CORPORATION

Bv: AIG SPECIALTY INSURANCE COMPANY

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

### LIMITED ADVICE OF CANCELLATION TO ENTITIES OTHER THAN THE NAMED INSURED ENDORSEMENT

This endorsement modifies insurance provided under the following:

#### **COMMERCIAL GENERAL LIABILITY AND** POLLUTION LEGAL LIABILITY COVERAGE FORM

It is hereby agreed that the following is added to SECTION IV - CONDITIONS:

In the event that we cancel this Policy for any reason other than non-payment of premium, and

- 1. the cancellation effective date is prior to this Policy's expiration date;
- 2. you are under an existing contractual obligation to notify a certificate holder when this Policy is canceled (hereinafter, the "Certificate Holder(s)") and have provided to us, either directly or through your broker of record, the email address of a contact at each such entity; and
- 3. we received this information after you received notice of cancellation of this Policy and prior to this Policy's cancellation effective date, via an electronic spreadsheet that is acceptable to us,

we will provide advice of cancellation (the "Advice") via e-mail to each such Certificate Holders within 30 days after you provide such information to us.

Proof of our emailing the Advice, using the information provided by you, will serve as proof that we have fully satisfied our obligations under this Endorsement.

This Endorsement does not affect, in any way, coverage provided under this Policy or the cancellation of this Policy or the effective date thereof, nor shall this Endorsement invest any rights in any entity not insured under this Policy.

All other terms, conditions, and exclusions shall remain the same.

AUTHORIZED REPRESENTATIVE

or countersignature (in states where applicable)

This endorsement, effective 12:01 AM: October 31, 2023

Forms a part of policy no.: EG 23010373

Issued to: CARBON ACTIVATED CORPORATION

Bv: AIG SPECIALTY INSURANCE COMPANY

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

It is hereby agreed that Endorsement No. 19, ADDITIONAL INSURED - COVERAGES A, B AND E - OWNERS, LESSEES OR CONTRACTORS - SCHEDULED PERSON(S) OR ORGANIZATION(S) ENDORSEMENT, Form # 142248 (08/2021), is deleted in its entirety and replaced with the following:

### ADDITIONAL INSURED - COVERAGES A, B AND E - OWNERS, LESSEES OR CONTRACTORS - SCHEDULED PERSON(S) OR ORGANIZATION(S) ENDORSEMENT

#### **SCHEDULE**

Name of Person(s) or Organization(s): BLANKET WHERE REQUIRED BY WRITTEN CONTRACT OR AGREEMENT.

It is hereby agreed that:

- I. Solely as respects Coverages A, B and E, **SECTION II WHO IS AN INSURED** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule above, but only with respect to liability arising out of your ongoing operations for that insured.
- II. Solely with respect to the insurance afforded to these additional insured(s), the following exclusion is added:

#### 2. Exclusions

This insurance does not apply to **bodily injury** or **property damage** occurring after:

- All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
- b. That portion of your work out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

All other terms, conditions and exclusions remain the same.

Authorized Representative or countersignature (where required by law)

This endorsement, effective 12:01 AM: October 31, 2023

Forms a part of policy no.: EG 23010373

Issued to: CARBON ACTIVATED CORPORATION

Bv: AIG SPECIALTY INSURANCE COMPANY

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

It is hereby agreed that Endorsement No. 8, ADDITIONAL INSURED VENDORS ENDORSEMENT - PRIMARY AND NON-CONTRIBUTORY, Form # 143302 (09/21), is deleted in its entirety and replaced with the following:

#### ADDITIONAL INSURED VENDORS ENDORSEMENT - PRIMARY AND NON-CONTRIBUTORY

#### **SCHEDULE**

#### Name of Person(s) or Organization(s) (Vendor):

BLANKET WHERE REQUIRED BY WRITTEN CONTRACT OR AGREEMENT EXECUTED PRIOR TO CLAIM OR LOSS.

#### **Your Products:**

ALL PRODUCTS OF THE NAMED INSURED.

Solely as respects Coverages A, E-1, E-2 and E-3, if applicable, **SECTION II** - **WHO IS AN INSURED** is amended to include as an insured any person(s) or organization(s) (referred to herein as the "vendor") shown in the Schedule above, but only with respect to **bodily injury**, **property damage**, **environmental damage**, or **emergency response costs** arising out of **your products** shown in the Schedule above which are distributed or sold in the regular course of the vendor's business, subject to all of the terms and conditions of this Policy and the additional following exclusions, terms and conditions:

- 1. The insurance afforded the vendor does not apply to:
  - a. Bodily injury, property damage, environmental damage, or emergency response costs for which the vendor is obligated to pay damages by reason of the assumption of liability in a contract or agreement. This exclusion does not apply to liability for damages that the vendor would have in the absence of the contract or agreement,
  - b. Any express warranty unauthorized by you,
  - c. Any physical or chemical change in your product made intentionally by the vendor,
  - **d.** Repackaging, except when unpacked solely for the purpose of inspection, demonstration, testing, or the substitution of parts under instructions from the manufacturer, and then

#### **ENDORSEMENT NO.** 21 (Continued)

repackaged in the original container,

- **e.** Any failure to make such inspections, adjustments, tests or servicing as the vendor has agreed to make or normally undertakes to make in the usual course of business, in connection with the distribution or sale of **your product**,
- **f.** Demonstration, installation, servicing or repair operations, except such operations performed at the vendor's premises in connection with the sale of **your product**,
- g. Your product which, after distribution or sale by you, has been labeled or relabeled, or used as a container, part or ingredient of any other thing or substance, by or for the vendor, or
- h. Bodily injury, property damage, environmental damage or emergency response costs arising out of the sole negligence of the vendor for its own acts or omissions or those of its employees or anyone else acting on its behalf. However, this exclusion does not apply to:
  - (1) The exceptions contained in Sub-paragraphs d. or f. above, or
  - (2) Such inspections, adjustments, tests or servicing as the vendor has agreed to make or normally undertakes to make in the usual course of business, in connection with the distribution or sale of your product.
- 2. This insurance does not apply to any products you have acquired from a vendor, or any ingredient, part or container, entering into, accompanying or containing such products.
- 3. Solely with respect to the coverage afforded to the vendor pursuant to this Endorsement, SECTION IV- CONDITIONS, paragraph 4. Other Insurance is deleted in its entirety and replaced with the following:

#### 4. Other Insurance

This insurance is primary and non-contributory, and our obligations are not affected by any other insurance carried by such vendor whether primary, excess, contingent, or on any other basis.

All other terms, conditions and exclusions remain the same.

DEPH M'SOY

This endorsement, effective 12:01 AM: October 31, 2023

Forms a part of policy no.: EG 23010373

Issued to: CARBON ACTIVATED CORPORATION

Bv: AIG SPECIALTY INSURANCE COMPANY

#### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

It is hereby agreed that Endorsement No. 20, ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - COMPLETED OPERATIONS ENDORSEMENT, Form # 143299 (09/21), is deleted in its entirety and replaced with the following:

## ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - COMPLETED OPERATIONS ENDORSEMENT

Solely as respects COVERAGE A - BODILY INJURY AND PROPERTY DAMAGE LIABILITY, COVERAGE B - PERSONAL AND ADVERTISING INJURY LIABILITY and COVERAGE E - ADDITIONAL POLLUTION LEGAL LIABILITY, it is hereby agreed that SECTION II - WHO IS AN INSURED is amended to include as an additional insured(s) the person(s) or organization(s) shown in the Schedule below, but only with respect to liability arising out of your work at the location designated and described in the Schedule below performed for that additional insured(s) and included in the products-completed operations hazard.

#### **SCHEDULE**

Name of Additional Insured person(s) or Organization(s): BLANKET WHERE REQUIRED BY WRITTEN CONTRACT OR AGREEMENT.

Location and Description of Completed Operations: ALL LOCATIONS OF THE NAMED INSURED.

All other terms, conditions and exclusions remain the same.

DEPH. M. 250A

Authorized Representative or countersignature (where required by law)

This endorsement, effective 12:01 AM, October 31, 2023

Forms a part of Policy No: EG 23010373

Issued to: CARBON ACTIVATED CORPORATION

By: AIG SPECIALTY INSURANCE COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

#### WAIVER OF TRANSFER OF RIGHTS OF RECOVERY ENDORSEMENT

This endorsement modifies insurance provided under the following:

### COMMERCIAL GENERAL LIABILITY AND POLLUTION LEGAL LIABILITY COVERAGE FORM

It is hereby agreed as follows:

SECTION IV - CONDITIONS, Paragraph 7. Transfer of Rights of Recovery Against Others to Us - Applicable to Coverages A, B, C and E is amended by the addition of the following at the end of such subparagraph:

We agree to waive this right of recovery against any entity to the extent that you had, prior to a **claim** or **occurrence**, a written agreement to waive such right.

All other terms, conditions, and exclusions shall remain the same.

**AUTHORIZED REPRESENTATIVE** 

or countersignature (in states where applicable)