

CERTIFICATE OF INSURANCE REQUEST

ELITE EQUIPMENT RENTAL at 244 W HWY 40 (333-1) Roosevelt, UT 84066 requires all renters/lessors of equipment to provide a Certificate of Insurance. Please have your insurance agent furnish us with a Certificate of Insurance meeting the following requirements:

1. General Liability & Additional Insured, Primary Non-Contributory, and Waiver of Subrogation endorsements required.

a. Limit for Combined Bodily Injury and Property Damage

Each Occurrence	\$1,000,000.00
Personal Injury	\$1,000,000.00
Products and Comp/Op Aggregate	\$2,000,000.00
General Aggregate	\$2,000,000.00

2. Automobile Liability & Additional Insured, Primary Non-Contributory, and Waiver of Subrogation endorsements required, in compliance with coverage required by state, but not less than:

- a. Combined Single Limit **\$1,000,000.00**
- b. Insurance Certificate MUST note Coverage for Automobile Physical Damage in additional to liability coverage.

3. Workers Compensation and Employers Liability coverage in compliance with every state in which work is being performed or a product sold. Waiver of Subrogation endorsement required.

a. Employers Liability Limit

- i. Bodily Injury by Accident, Each Accident **\$1,000,000.00**

4. Excess/Umbrella Liability

- a. Bodily Injury a Property Damage, Combined **\$1,000,000.00**

5. Description of Operations (Blanket Coverage or Unit Specific)

- a. Certificate holder: Elite Equipment Rental at 244 W HWY 40 (333-1) Roosevelt, UT 84066 is included as an additional insured/loss payee.
- b. Elite Equipment Rental LLC as additional insured on the commercial general liability and automobile liability policies per contract.
- c. Loss Payee on the physical damage section of the commercial automobile policy with respect to any leased/rented vehicles/trailers per the rental agreement with named insured.
- d. General and Auto Liability policies are primary and non-contributory.
- e. Describe unit by Vin, Model, Serial number & include replacement value.

- i. VIN #: _____
- ii. Year/Make/Model: _____
- iii. Other Serial: _____
- iv. Replacement Value: **\$735,000.00**
- v. Unit #: _____

6. Inland Marine:

- a. Certificate Holder (lessor) is included as loss payee on (specify equipment unit specific and value)