

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Greyling Ins. Brokerage/EPIC 3780 Mansell Rd. Suite 370 Alpharetta, GA 30022	CONTACT NAME: <b>Trudy Henry</b>
	PHONE (A/C, No, Ext): <b>770-552-4225</b> FAX (A/C, No): <b>866-550-4082</b> E-MAIL ADDRESS: <b>acecertificates@greyling.com</b>
INSURED Taylor Engineering Inc. 10199 Southside Blvd., Ste 310 Jacksonville, FL 32256	INSURER(S) AFFORDING COVERAGE      NAIC #
	INSURER A : <b>Hartford Accident &amp; Indemnity Company</b> <b>22357</b>
	INSURER B : <b>Hartford Fire Insurance Co.</b> <b>19682</b>
	INSURER C : <b>Hartford Underwriters</b> <b>30104</b>
	INSURER D :
	INSURER E :

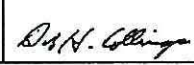
COVERAGES      CERTIFICATE NUMBER: **21-22**      REVISION NUMBER:

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 SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		20SBWNA6176	11/01/2021	11/01/2022	EACH OCCURRENCE      \$1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)      \$1,000,000
						MED EXP (Any one person)      \$10,000
						PERSONAL & ADV INJURY      \$1,000,000
						GENERAL AGGREGATE      \$2,000,000
						PRODUCTS - COMP/OP AGG      \$2,000,000
C	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/>		20UEGLP0627	11/01/2021	11/01/2022	COMBINED SINGLE LIMIT (Ea accident)      \$1,000,000
						BODILY INJURY (Per person)      \$
						BODILY INJURY (Per accident)      \$
						PROPERTY DAMAGE (Per accident)      \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$10000		20SBWNA6176	11/01/2021	11/01/2022	EACH OCCURRENCE      \$4,000,000
						AGGREGATE      \$4,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?    Y/N (Mandatory in NH) <input checked="" type="checkbox"/> N    N/A If yes, describe under DESCRIPTION OF OPERATIONS below		20WBGBN0954	11/01/2021	11/01/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
						E.L. EACH ACCIDENT      \$1,000,000
						E.L. DISEASE - EA EMPLOYEE      \$1,000,000
						E.L. DISEASE - POLICY LIMIT      \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may RE: Coastal & Environmental Engineering Services - Okaloosa County E an Additional Insured on the above referenced liability policies with the where required by written contract. Waiver of Subrogation in favor of Ad by written contract & allowed by law.

CONTRACT # C18-2727-TDD  
 TAYLOR ENGINEERING, INC.  
 EAST PASS INLET SUPPLEMENTAL SEDIMENT EXCAVATION  
 EXPIRES: 12/31/2021

CERTIFICATE HOLDER Okaloosa County Purchasing Dept. 602-C NORTH PEARL STREET CRESTVIEW, FL 32536-0000	CANCELLATION 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 
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