



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/17/2023

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).

PRODUCER Marsh USA LLC 1717 Arch Street PHILADELPHIA, PA 19103-2797 CN102051407--GAWU-23-24	CONTACT NAME:		
	PHONE (A/C, No, Ext):	FAX (A/C, No):	
INSURED The Hertz Corporation 8501 Williams Road Estero, FL 33928	E-MAIL ADDRESS:		
	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : National Union Fire Insurance Co.		19445
	INSURER B : A/U Insurance Co		19399
	INSURER C : N/A		N/A
	INSURER D :		
INSURER E :			
INSURER F :			

COVERAGES **CERTIFICATE NUMBER:** CLE-006934227-02 **REVISION NUMBER: 2**

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 INSD	SUBR 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 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			GL3372553	01/01/2023	01/01/2024	EACH OCCURRENCE \$ 5,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 5,000,000 GENERAL AGGREGATE \$ 6,000,000 PRODUCTS - COMP/OP AGG \$ 5,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			See Below	01/01/2023	01/01/2024	COMBINED SINGLE LIMIT (Ea accident) \$ See Below BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	WC013755747 (AOS) WC013755748 (CA) WC013755749 (WI)	01/01/2023 01/01/2023 01/01/2023	01/01/2024 01/01/2024 01/01/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 5,000,000 E.L. DISEASE - EA EMPLOYEE \$ 5,000,000 E.L. DISEASE - POLICY LIMIT \$ 5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: L11-0384-AP, L07-0305-AP, & L21-0496-AP.

Okaloosa County Board of County Commissioners is included as Additional Insured in accordance with the policy provisions of the General Liability and Automobile Liability policies where required by written contract. General Liability and Automobile Liability policies evidenced herein are Primary to other insurance available to an Additional Insured, but only in accordance with the policy's provisions. A Waiver of Subrogation is granted in favor of Okaloosa County, Florida in accordance with the policy provisions of the Workers' Compensation policy where required by written contract.

CERTIFICATE HOLDER

Okaloosa County Board of County
Commissioners
Attn: Destin-Fort Walton Airport Administration
1701 Highway 85, North
Eglin, AFB, FL 32542

CONTRACT#: L11-0384-AP

HERTZ CORPORATION DBA ADVANTAGE RENT A CAR

SERVICE FACILITY LEASE

EXPIRES: 06/30/2032

AUTHORIZED REPRESENTATIVE

Marsh USA Inc.

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AGENCY CUSTOMER ID: CN102051407

LOC #: Cleveland



ADDITIONAL REMARKS SCHEDULE

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AGENCY Marsh USA LLC		NAMED INSURED The Hertz Corporation 8501 Williams Road Estero, FL 33928	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
 FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

Contingent General Liability

Policy Number: GL3372554

Carrier: National Union Fire Insurance Company

Policy Term: 1/1/2023-2024

States Covered: AL, AZ, CA, CO, CT, FL, GA, HI, IL, IN, KY, LA, MA, MD, MI, MN, MO, NC, NJ, NM, NV, NY, OK, OR, PA, TN, TX, UT, VA

Limit: \$1,000,000

Auto Dealers AL (AOS)

Policy Number: AL4805390

Carrier: National Union Fire Insurance Company

Policy Term: 1/1/2023-2024

States Covered: AOS

Limit: \$2,000,000

Includes Garage Liability

Rental Fleet AL AOS

Policy Number: AL4805386

Carrier: National Union Fire Insurance Company

Policy Term: 1/1/2023-2024

States Covered: AR, CO, HI, MI, MN, NH, NM, OR, RI, SD, WI

Limit: \$100,000

Shuttle Bus AL AOS

Policy Number: AL4805387

Carrier: National Union Fire Insurance Company

Policy Term: 1/1/2023-2024

States Covered: CA, CO, CT, FL, IL, KY, MI, MO, NC, NY, PA, TX

Limit: \$1,000,000

Shuttle Bus AL VA

Policy Number: AL4805389

Carrier: National Union Fire Insurance Company

Policy Term: 1/1/2023-2024

States Covered: VA

Limited: \$1,000,000

Shuttle Bus AL MA

Policy Number: AL4805388

Carrier: AIU Insurance Company

Policy Term: 1/1/2023-2024

States Covered: MA

Limit: \$1,000,000

AGENCY CUSTOMER ID: CN102051407

LOC #: Cleveland



ADDITIONAL REMARKS SCHEDULE

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POLICY NUMBER		
CARRIER	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

Additional Named Insureds:

1. The Hertz Corporation
2. Hertz Vehicles, LLC
3. Hertz Local Edition (HLE)
4. Firely Rent A Car LLC
5. Dollar Thrifty Automotive Group, Inc.
6. DTG Operations, Inc.
7. DTG Operations, Inc. d/b/a Dollar Rent A Car
8. DTG Operations, Inc. d/b/a Thrifty Car Rental
9. Rental Car Finance Corp.
10. Thrifty Rent-A-Car System, Inc.
11. Dollar Rent A Car, Inc.
12. DTG Supply, Inc.
13. Thrifty Car Sales, Inc.

