



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
01/07/2022

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
Aon Risk Services Central, Inc.
Columbia Center II
101 West Big Beaver Road
14th Floor/Suite 1444
Troy MI 48064 USA

CONTACT NAME:
PHONE (A/C, No. Ext): (866) 283-7122 FAX (A/C, No.): (800) 363-0105
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURED
The Hertz Corporation
8501 Williams Road
Estero FL 33928 USA

INSURER A:	Ironshore Specialty Insurance Company	25445
INSURER B:	Liberty Surplus Insurance Corporation	10725
INSURER C:	ACE American Insurance Company	22667
INSURER D:	AIU Insurance Company	19399
INSURER E:	National Union Fire Ins Co of Pittsburgh	19445
INSURER F:		

COVERAGES

CERTIFICATE NUMBER: 570091226780

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.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
E	<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:			3372553	01/01/2022	01/01/2023	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
E	AUTOMOBILE LIABILITY			4805386 AOS ISA H25541728 NY	01/01/2022	01/01/2023	COMBINED SINGLE LIMIT (Ea accident) \$60,000
C	<input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRER AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY				10/01/2021	10/01/2022	BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	UMBRELLA LIAB EXCESS LIAB DED RETENTION						EACH OCCURRENCE AGGREGATE
D	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 N	N/A	WC013755689 AOS WC013755690 CA	01/01/2022	01/01/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH 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 m
RE: New Agreement - Rental Car Concessions. Okaloosa County, Florida
policy provisions of the General Liability and Automobile Liability
policies evidenced herein are Primary to other insurance available
policy's provisions. A Waiver of Subrogation is granted in favor of
provisions of the Workers' Compensation policy.

CONTRACT # L11-0384-AP
HERTZ CORPORATION
SERVICE FACILITY SPACE LEASE
EXPIRES: 06/30/2032

CERTIFICATE HOLDER

CANCELLATION

Okaloosa County, Florida
1250 Eglin Parkway, Suite 100
Shalimar FL 32579 USA

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

Aon Risk Services Central, Inc.

Holder Identifier :

570091226780

Certificate No :



ADDITIONAL REMARKS SCHEDULE

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AGENCY Aon Risk Services Central, Inc.		NAMED INSURED The Hertz Corporation	
POLICY NUMBER See Certificate Number: 570091226780			
CARRIER See Certificate Number: 570091226780	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

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

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER	
INSURER	
INSURER	
INSURER	

ADDITIONAL POLICIES

If a policy below does not include limit information, refer to the corresponding policy on the ACORD certificate form for policy limits.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
	WORKERS COMPENSATION							
D		N/A		WC013755692 WI	01/01/2022	01/01/2023		
D		N/A		WC013755691 NY	01/01/2022	01/01/2023		
	OTHER							
A	Env Site Liab			ISPILLSCBZXX001 Legal Liability	08/15/2021	08/15/2022	BI/PD/Remediation	\$5,000,000
							Deductible	\$50,000



ADDITIONAL REMARKS SCHEDULE

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AGENCY Aon Risk Services Central, Inc.		NAMED INSURED The Hertz Corporation	
POLICY NUMBER See Certificate Number: 570091226780			
CARRIER See Certificate Number: 570091226780	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Addit'l Named Insureds / Auto Liability

Additional Named Insureds:

The Hertz Corporation
Hertz Vehicles, LLC
Hertz Local Edition (HLE)
Firefly Rent A Car LLC

Automobile Liability Continued:

UMB has an SIR above the state & fronted policies up to the UMB \$10,000,000 limit

Hertz Global Holdings, Inc. is self-insured in the following states: AL, AK, AZ, CA, CT, DE, DC, FL, GA, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NJ, NC, ND, OH, OK, PA, SC, TN, TX, UT, VT, VA, WA, WV, WY

4805386 (Minimum Financial Responsibility (MFR) Limit per State - AR, CO, HI, MI, MN, MT, NH, NM, OR, RI, SD, WI

Ace American Insurance Co.

10/01/2021 - 10/01/2022

ISA H25541728 (Minimum Financial Responsibility (MFR) limit for NY only)