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CERTIFICATE OF AIRCRAFT INSURANCE

DATE (MM/DD/YYYY) 07/24/2023

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this certificate	does n	ot co	onfer rig	hts t	to the cer	tifica	te ho	lder in	lieu o	fsuc	ch endorsemer	ıt(s).					
PRODUCER Avemco Insurance Company 8490 Progress Drive, Suite 200 Frederick, MD 21701							NAME PHON	NAME: Avemco Insurance Company PHONE: 800-638-8440									
							A/C, No, Ext): (A/C, No): E-MAIL ADDRESS: avemco@ave.com										
										RODUCER CUSTOMER ID No.							
INSURED									INSURER(S) AFFORDING COVERAGE INSURER A: AVEMCO INSURANCE COMPANY						100%	NAIC No. 10367	
12383 Tramonto Dr								INSUF	RER B	:							
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CERTIFICATE HOLDER						CONTRACT:L08-0317-AP WILLIAM B. DAY DAP BLOCK 7/LOT 3 REPLACES #L155 EXPIRES:05/17/2033											
Okaloosa County board of county commissioners 1701 State Road 85 North																	
Eglin Air Force Base, FL 34542							l l	AUTHORIZED REPRESENTATIVE									
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AIRPORT USE - AIRPORT HANGAR ENDORSEMENT

You have a written airport use or airport hangar agreement for your insured aircraft with the party shown below.

We agree to include them as an "insured person" under that definition in your Policy. We also agree to waive our recovery rights against them for loss to your insured aircraft (you do, too).

We agree to these changes provided their liability for **bodily injury**, **property damage**, or **loss** arises out of their agreement to let **you** use their airport or their hangar. THESE CHANGES DO NOT APPLY WHEN THEIR LIABILITY ARISES OUT OF THEIR MANUFACTURE, REPAIR, SERVICE, SALE, OR USE OF **YOUR INSURED AIRCRAFT**.

We will notify this insured person when your Policy is cancelled. Notice will be sent at least 30 days before the cancellation date. Only 10 days' notice (or that notice required by your state, if more) will be given if we cancel for nonpayment of premium.

If this **insured person** has other liability insurance, that insurance shall apply first. The addition of this **insured person** to **your** Policy does not increase the Limits of Liability provided.

Okaloosa County board of county commissioners 1701 State Road 85 North

Eglin Air Force Base, FL 34542

This Endorsement is effective Mo.DayYr. 05/01/2023 at 12:01 A.M. local time at **your** address shown in item 1 of the Data Page and is part of Policy Number 210117630702 issued by Avemco Insurance Company.



CERTIFICATE OF AIRCRAFT INSURANCE

DATE (MM/DD/YYYY) 07/24/2023

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(les) 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 NAME: Avemco Insurance Company FAX: 800-863-3338 Avemco Insurance Company PHONE: 800-638-8440 8490 Progress Drive, Suite 200 (A/C, No, Ext): (A/C, No): Frederick, MD 21701 E-MAIL ADDRESS: avemco@ave.com PRODUCER CUSTOMER ID No. INSURER(S) AFFORDING COVERAGE INSURED NAIC No. INSURER A: AVEMCO INSURANCE COMPANY William B Day 100% 10367 12383 Tramonto Dr INSURER B: Conroe, TX 77304-4560 INSURER C: INSURER D : INSURER E: INSURER F: 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 HERIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS **POLICY INFORMATION CERTIFICATE NUMBER: REVISION NUMBER:** POLICY TYPE LINE OF BUSINESS SUBCODE HELICOPTER INDUSTRIAL PLEASURE & COMMERCIAL. AIRPLANE EXCESS MIXED-FLEET OHOTA Х X SHARE NON-OWNED LIABILITY **HULL & LIABILITY** HULL ONLY Х ONLY AIRCRAFT INFORMATION ACORD 333, Aircraft Schedule attached MODEL SERIAL NUMBER REGISTRATION NUMBER YEAR MAKE 1956 PA-18-150 Piper N530AK TERRITORY: AIRCRAFT COVERAGES INSURER LETTER POLICY NUMBER EXPIRATION DATE EFFECTIVE DATE ADDITIONAL INSURED (Y / N) SUBROGATION WAIVED (Y /N) 210117630702 05/01/2023 05/01/2024 COVERAGE OPTIONS IIMIT APPLIES TO LIMIT **APPLIES TO** All Risk Ground & Flight Ground Not In Motion \$ Ded. - Not in motion AIRCRAFT HULL Ground Not In Flight AGREED VALUE Ded. - In motion Including Passengers EA OCC EA PER 1.000,000 100,000 AIRCRAFT LIABILITY S \$ EA PASS Excluding Passengers AGGR \$ \$ INCLUDING CREW X \$ MEDICAL PAYMENTS EXCLUDING CREW FA PER 3,000 **EA PASS** COVERAGE CODE DESCRIPTION LIMIT OPTIONS APPLIES TO LIMIT APPLIES TO \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ DESCRIPTION OF OPERATIONS / REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) SEE ATTACHED ENDORSEMENT 125301 **CERTIFICATE HOLDER** CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE Okaloosa County board of county commissioners EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. 171 State Road 85 North Eglin Air Force Base, FL 34542 AUTHORIZED REPRESENTATIVE MARCI L VERONIE © 2009, 2015 ACORD CORPORATION. All Rights reserved.

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Okaloosa County board of county commissioners 171 State Road 85 North

Eglin Air Force Base, FL 34542

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