

# Commercial Certificate of Insurance



**FARMERS**

Agency  
 Name  
 &  
 Address

- SAUCIER & ASSOCIATES
- 9700 RICHMOND AVE STE 101
- HOUSTON, TX 77042
- 

Issue Date (MM/DD/YY) 02/11/2009

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policies shown below.

St. 19 Dist. 65 Agent 19

### Companies Providing Coverage:

Insured  
 Name  
 &  
 Address

- SOUTHWEST PIPE
- 1700 NEWMAN ROAD
- ALVIN, TX 77210
- 

Company Letter **A** Truck Insurance Exchange  
 Company Letter **B** Farmers Insurance Exchange  
 Company Letter **C** Mid-Century Insurance Company  
 Company Letter **D** PENN AMERICA

### Coverages

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.

Co. Ltr.	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Policy Limits	
D	<input checked="" type="checkbox"/> General Liability <input checked="" type="checkbox"/> Commercial General Liability <input checked="" type="checkbox"/> - Occurrence Version <input checked="" type="checkbox"/> Contractual - Incidental Only <input checked="" type="checkbox"/> Owners & Contractors Prot.	PAC6671184	01/09/2009	01/09/2010	General Aggregate Products-Comp/OPS Aggregate	\$ 2,000,000 \$ 2,000,000
A	<input checked="" type="checkbox"/> Automobile Liability All Owned Commercial Autos <input checked="" type="checkbox"/> Scheduled Autos <input checked="" type="checkbox"/> Hired Autos <input checked="" type="checkbox"/> Non-Owned Autos Garage Liability	604326114	01/09/2009	01/09/2010	Combined Single Limit Bodily Injury (Per person) Bodily Injury (Per accident) Property Damage Garage Aggregate	\$ 2,000,000 \$ 1,000,000 \$ 1,000,000 \$ 1,000,000 \$ 2,000,000
D	<input checked="" type="checkbox"/> Umbrella Liability	PAC6671184	01/09/2009	01/09/2010	Limit	\$ 5,000,000
D	Workers' Compensation and Employers' Liability	Q000923379	01/09/2009	01/09/2010	Statutory Each Accident Disease - Each Employee Disease - Policy Limit	\$ 1,000,000 \$ 1,000,000 \$ 1,000,000

Description of Operations/Vehicles/Restrictions/Special items:

### Certificate Holder

Name  
 &  
 Address

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### Cancellation

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

SHAYNE SAUCER  
 Authorized Representative