

0009

### Document Information Form

Mine Number: C/007/022

File Name: Incoming

To: DOGM

From:

Person N/A

Company N/A

Date Sent: JUN 24, 1996

Explanation:

CERTIFICATE OF LIABILITY INSURANCE

cc:

File in: C/007/022, 1996, Incoming

Refer to:

- Confidential
- Shelf
- Expandable

Date \_\_\_\_\_ For additional information







# CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

PAGE 2 OF 2

18-JUN-1996

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 BELOW.

INSURED

23345

PRODUCER

Willis Corroon Corporation of Ohio  
655 Metro Place South  
Suite 600  
PO Box 7157  
Dublin OH 43017  
(614) 766-8900  
Heidi V. Elder

AMERICAN ELECTRIC POWER COMPANY, INC. AND SUBSIDIARIES  
1 RIVERSIDE PLAZA  
P.O. BOX 16631  
COLUMBUS OH 43216-6631

## 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 MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
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## DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

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Per Ohio Revised Code Section 3999.21, as enacted by House Bill 347, "ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD."

\*\*\*\*\*

INSURED INCLUDES: BLACKHAWK COAL CO.

- 1) WILLOW CREEK PERMIT NO. UT-007/002.
- 2) INCLUDES USE OF EXPLOSIVES.
- 3) ANY AND ALL PROVISIONS OF THIS POLICY WHICH ARE IN CONFLICT WITH THE STATUTES OF THE STATE WHEREIN THIS POLICY IS APPLICABLE ARE UNDERSTOOD, DECLARED AND ACKNOWLEDGED BY THIS COMPANY TO BE AMENDED TO CONFORM TO SUCH STATUES.
- A) ACCELERATION POLICY AEP 60882-CM, FORM CG00020286, EFFECTIVE 7-1-90/91.
- B) CURRENT RETROACTIVE DATE IS 7-1-90. ALL POLICIES PRIOR TO 7-1-90 ON AN OCCURRENCE BASIS.
- C) NO TAIL COVERAGE PURCHASE, AS THERE HAVE BEEN NO LAPSES OR CHANGES IN COVERAGE.
- D) ANY CLAIM OCCURRING AFTER 7-1-90 WILL BE COVERED BY THE POLICY IN EFFECT WHEN THE CLAIM IS FILED. POLICY ALLOWS FOR AN AUTOMATIC EXTENDED REPORTING PERIOD FOR OCCURRENCES OF 60 DAYS AFTER TERMINATION OF COVERAGE. CLAIMS ARISING FROM SUCH AN OCCURRENCE ARE COVERED FOR 5 YEARS AFTER NOTIFICATION.

## CERTIFICATE HOLDER

UTAH DIVISION OF OIL  
GAS & MINING  
4241 STATE OFFICE BLDG.  
SALT LAKE CITY UT 84114

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ~~SEND~~ MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, ~~BY FAX OR BY TELEPHONE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, AND BY REGISTERED MAIL TO THE CERTIFICATE HOLDER NAMED TO THE LEFT.~~

AUTHORIZED REPRESENTATIVE

WILLIS CORROON



**Willis Corroon  
Corporation of  
Ohio**

*Insurance*

*Surety*

*Benefits*

*Risk Management*

655 Metro Place South

Suite 600

Dublin, Ohio 43017

(614)766-8900

Fax (614)766-8999

RE: CERTIFICATE OF INSURANCE

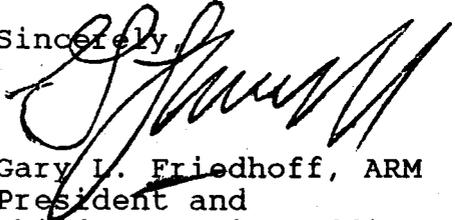
INSURED: AMERICAN ELECTRIC POWER COMPANY, INC.

I AM ENCLOSING A CERTIFICATE OF INSURANCE ISSUED ON  
BEHALF OF OUR CLIENT, AMERICAN ELECTRIC POWER COMPANY,  
INC.

IF YOU HAVE ANY QUESTIONS REGARDING THE ENCLOSED, PLEASE  
FEEL FREE TO CONTACT:

SUE KASSON AT AEP (614) 223-1087 OR  
CRAIG MOORE AT AEP (614) 223-1088

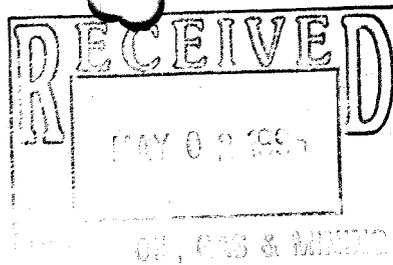
Sincerely,

  
Gary L. Friedhoff, ARM  
President and  
Chief Executive Officer

GLF/hve

Enclosure

WILLIS CORROON



**Willis Corroon**  
**Corporation of**  
**Ohio**  
*Insurance*  
*Surety*  
*Benefits*  
*Risk Management*  
655 Metro Place South  
Suite 600  
Dublin, Ohio 43017  
(614)766-8900  
Fax (614)766-8999

RE: CERTIFICATE OF INSURANCE

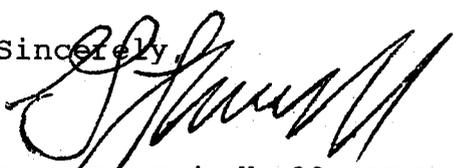
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CRAIG MOORE AT AEP (614) 223-1088**

Sincerely,



Gary L. Friedhoff, ARM  
President and  
Chief Executive Officer

GLF/hve

Enclosure

**ACORD CERTIFICATE OF LIABILITY INSURANCE** PAGE 1 OF 2 DATE (MM/DD/YY) 17-APR-1996

PRODUCER  
 Willis Corroon Corporation of Ohio  
 685 Metro Place South  
 Suite 600  
 PO Box 7157  
 Dublin OH 43017  
 (614) 766-8900  
 Heidi V. Elder

22528  
**RECEIVED**  
 MAY 02 1996

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 BELOW.

**COMPANIES AFFORDING COVERAGE**

- COMPANY **A** United States Fire Insurance Company
- COMPANY **B** Energy Insurance (Bermuda) Limited
- COMPANY **C**
- COMPANY **D**

INSURED  
 American Electric Power Company, Inc. and subsidiaries  
 1 Riverside Plaza  
 P.O. Box 16631  
 Columbus OH 43216-6631

**COVERAGES** REPORTED AS OF 01-JUL-1996

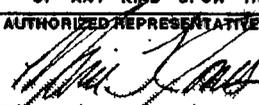
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CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<b>GENERAL LIABILITY</b>	5410180089	01-JUL-1996	01-JUL-1997	GENERAL AGGREGATE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG \$ 1,000,000
	<input checked="" type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 250,000
	<input type="checkbox"/> OWNERS & CONTRACTORS PROT				EACH OCCURRENCE \$ 250,000
					FIRE DAMAGE (Any one fire) \$ 50,000
					MED EXP (Any one person) \$
A	<b>AUTOMOBILE LIABILITY</b>	1380165633	01-JUL-1996	01-JUL-1997	COMBINED SINGLE LIMIT \$ 250,000
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
<input checked="" type="checkbox"/> HIRED AUTOS					
<input checked="" type="checkbox"/> NON-OWNED AUTOS					
	<b>GARAGE LIABILITY</b>				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY \$
					EACH ACCIDENT \$
					AGGREGATE \$
B	<b>EXCESS LIABILITY</b>	P03-95-02	01-JUL-1995	01-JUL-1998	EACH OCCURRENCE \$ 4,750,000
	<input type="checkbox"/> UMBRELLA FORM				AGGREGATE \$ 20,000,000
	<input checked="" type="checkbox"/> OTHER THAN UMBRELLA FORM				\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>				WC STATUTORY LIMITS OTH-ER
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				EL EACH ACCIDENT \$
					EL DISEASE-POLICY LIMIT \$
					EL DISEASE-EA EMPLOYEE \$
	<b>OTHER</b>				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS  
**SEE ATTACHED**

**CERTIFICATE HOLDER**  
 Division of Oil Gas and Mining  
 State of Utah  
 Attn: Harold Sandbeck  
 3 Triad Center, Ste. 350  
 Salt Lake City UT 84187

**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.

AUTHORIZED REPRESENTATIVE  




# CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

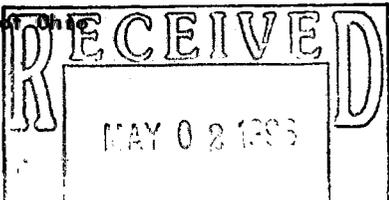
PAGE 2 OF 2 17-APR-1996

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INSURED 22528

American Electric Power Company, Inc. and subsidiary  
 1 Riverside Plaza  
 P.O. Box 16631  
 Columbus OH 43216-6631

PRODUCER  
 Willis Corroon Corporation of Ohio  
 655 Metro Place South  
 Suite 600  
 PO Box 7157  
 Dublin OH 43017  
 (614) 766-8900  
 Heidi V. Elder



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