

0007

Document Information Form

Mine Number: C/007/022

File Name: Incoming

To: DOGM

From:

Person N/A

Company N/A

Date Sent: N/A

Explanation:

CERTIFICATE OF LIABILITY INSURANCE

cc:

File in: C/007/022, 1997, Incoming

Refer to:

- Confidential
- Shelf
- Expandable

Date _____ For additional information

PRODUCER
JOHNSON & HIGGINS

60 EAST SOUTH TEMPLE, #1600
SALT LAKE CITY, UTAH 84111

PATI BOUMAN (801) 539-7429

INSURED
THE SAVAGE COMPANIES
ATT DEAN REES
5250 SOUTH 300 WEST #200
SALT LAKE CITY, UT 84107

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 CONTINENTAL CASUALTY CO *Original fireproof*
- COMPANY B *ACT/007/022*
- COMPANY C *Copy to #4 ad Green Bidders*
- COMPANY D *Copy PAM: Frank Bill Capito*

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)	LIMITS																
A	GENERAL LIABILITY	GL002521823	4/01/97	4/01/98	<table border="1"> <tr><td>GENERAL AGGREGATE</td><td>\$ 1,000,000</td></tr> <tr><td>PRODUCTS-COMP/OP AGG</td><td>\$ 2,000,000</td></tr> <tr><td>PERSONAL & ADV INJURY</td><td>\$ 1,000,000</td></tr> <tr><td>EACH OCCURRENCE</td><td>\$ 1,000,000</td></tr> <tr><td>FIRE DAMAGE (Any one fire)</td><td>\$ 1,000,000</td></tr> <tr><td>MED EXP (Any one person)</td><td>\$ 5,000</td></tr> </table>	GENERAL AGGREGATE	\$ 1,000,000	PRODUCTS-COMP/OP AGG	\$ 2,000,000	PERSONAL & ADV INJURY	\$ 1,000,000	EACH OCCURRENCE	\$ 1,000,000	FIRE DAMAGE (Any one fire)	\$ 1,000,000	MED EXP (Any one person)	\$ 5,000				
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / SPECIAL ITEMS (LIMITS MAY BE SUBJECT TO DEDUCTIBLES OR RETENTIONS).

XCUI COVERAGES ARE INCLUDED IN THE POLICY FORM RE: SAVAGE COAL TERMINAL ACT/007/022

CERTIFICATE HOLDER

STATE OF UT. DIVISION OF OIL,
GAS & MINING, UT DEPT. OF
NATURAL RESOURCES
1594 W.NORTH TEMPLE SUITE 1210
SALT LAKE CITY UT 84114-5801

CANCELLATION

SHOULD ANY OF THE ABOVE EXPIRATION DATE THEN 45 * DAYS WRITTEN BUT FAILURE TO MAIL OF ANY KIND UPON AUTHORIZED REPRESENTATIVE

Kim Evans / 1/7

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Refer to Record No 0007 Date N/A
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COMPANY

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Original fireproof

COMPANY

B

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C

Copy to #4 ad Green Bidders

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D

Copy from: Pat Billcappo

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SALT LAKE CITY UT 84114-5801

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ~~SEND BY MAIL~~ 45 * 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

Kim Evans