

ACORD EVIDENCE PROPERTY INSURANCE

DATE (MM/DD/YY)
07/28/2000

THIS IS EVIDENCE THAT INSURANCE AS IDENTIFIED BELOW HAS BEEN ISSUED, IS IN FORCE, AND CONVEYS ALL THE RIGHTS AND PRIVILEGES AFFORDED UNDER THE POLICY.

PRODUCER Morrison-Reynolds & Assoc., Inc 0022 1230 N. Robinson Oklahoma City, OK 73103 (405) 235-6633 FAX (405) 235-6634		COMPANY HARTFORD STEAM BOILER	
PHONE (A/C, No, Ext): CODE: SUB CODE:		LOAN NUMBER POLICY NUMBER UNI7701435	
AGENCY CUSTOMER ID #: INSURED SUNNYSIDE COGENERATION ASSOC. C/O CONSTELLATION ENERGY GROUP 250 W. PRATT ST., 20TH FLOOR BALTIMORE MD 21201		EFFECTIVE DATE 08/01/00	EXPIRATION DATE 08/01/01
		<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:			

PROPERTY INFORMATION

LOCATION/DESCRIPTION
COMMERCIAL PROPERTY, BOILER & MACHINERY AND BUSINESS INTERRUPTION COVERAGE FOR A COGENERATION PLANT LOCATED: ONE POWER PLANT ROAD, SUNNYSIDE, UT 84539

COVERAGE/PERILS/FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
ALL RISK, REPLACEMENT COST, COMBINED PROPERTY DAMAGE AND BOILER & MACHINERY - AGREED AMOUNT.	151929179	50,000
BUSINESS INTERRUPTION FOR A 12 MONTH PERIOD	20,266,849	
EARTHQUAKE	151929179	
ACCOUNTS RECEIVABLE	151929179	
VALUABLE PAPERS	5,000,000	
TRANSMISSION & DISTRIBUTION LINES	5,000,000	
	1,500,000	

RECEIVED
 JUL 31 2000
 DIVISION OF
 OIL, GAS AND MINING

REMARKS (including Special Conditions)

\$50,000 DED. APPLIES WITH THE EXCEPTION OF \$100,000 STEAM TURBINE/GENERATOR & \$100,000 TRANSFORMER; BUSINESS INTERRUPTION DED. IS A 30 DAY WAITING PERIOD. EARTHQUAKE DED - MIN. 5% OR \$ 250,000 WHICHEVER IS GREATER-CERTIFICATE HOLDER IS LOSS PAYEE & ADD INSURED

CANCELLATION

THE POLICY IS SUBJECT TO THE PREMIUMS, FORMS, AND RULES IN EFFECT FOR EACH POLICY PERIOD. SHOULD THE POLICY BE TERMINATED, THE COMPANY WILL GIVE THE ADDITIONAL INTEREST IDENTIFIED BELOW 60 DAYS WRITTEN NOTICE, AND WILL SEND NOTIFICATION OF ANY CHANGES TO THE POLICY THAT WOULD AFFECT THAT INTEREST, IN ACCORDANCE WITH THE POLICY PROVISIONS OR AS REQUIRED BY LAW.

ADDITIONAL INTEREST

NAME AND ADDRESS	MORTGAGEE	<input checked="" type="checkbox"/>	ADDITIONAL INSURED
	LOSS PAYEE	<input type="checkbox"/>	

DEPT. OF OIL, GAS & MINING (DOG M)
 ATTN: PAM GRUBAUGH - LITTIG
 P.O. BOX 145801
 SALT LAKE CITY UT 84414-5801

LOAN # _____

AUTHORIZED REPRESENTATIVE
Barbara Castle