

0011

7/19/05

ACORD EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YY)
07/01/2004

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.

Copy from

PRODUCER Meyers-Reynolds & Associates 1230 N. Robinson Ave Oklahoma City, OK 73103		PHONE (A/C, No, Ext): (405)235-6633	COMPANY Quota Share as Follows: Factory Mutual Ins. Co. 75% of 100% Assoc. Elec. & Gas Ins. Serv. 15% of 100% Energy Ins. Serv. 10% of 100%	
AGENCY CUSTOMER ID #: 00003718		SUB CODE:	LOAN NUMBER	POLICY NUMBER M202430401
INSURED Sunnyside Cogeneration Assoc. c/o Constellation Energy Group 750 E Pratt Street, 16th Floor Baltimore, MD 21202-3106		EFFECTIVE DATE 07/01/2004	EXPIRATION DATE 07/01/2005	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:				

PROPERTY INFORMATION

LOCATION/DESCRIPTION
 Cogeneration Facility located at: One Power Plant Road, Sunnyside, UT 84359

COVERAGE/PERILS/FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
All Risk, Replacement Cost, Property Damage-Agreed Amount	186,061,326	250,000
Boiler & Machinery	Included	500,000
Time Element	17,860,456	45 day wait
Flood	150,000,000	
Earth Movement	150,000,000	
Accounts Receivable	5,000,000	
Valuable Papers	5,000,000	

REMARKS (Including Special Conditions)
 Re: Permit #ACT/007/035. Certificate Holder is Loss Payee and Additional 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 Department of Oil, Gas & Mining (DOGM) Attn: Pam Grubaugh-Littig P.O. Box 145801 Salt Lake City, UT 84414-5801	<input type="checkbox"/> MORTGAGEE	<input checked="" type="checkbox"/> ADDITIONAL INSURED
	<input checked="" type="checkbox"/> LOSS PAYEE	<input type="checkbox"/>
LOAN #		
AUTHORIZED REPRESENTATIVE Lee Reynolds/KELLI <i>Lee Reynolds</i>		