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ORIGINAL BOUND FILE
COPY TO MINE FILE/PAN
~~EX-1015/002~~

Evergreen Insurance Associates, Inc.

P.O. Box 505, Ebensburg, PA 15931-0505 (814) 472-7961 CEP/043/002

July 29, 1986

RECEIVED
AUG 08 1986

DIVISION OF
OIL, GAS & MINING

St. of Utah
Dept. of Natural Resources
Division of Oil & Mining
355 W.N. Temple
3 Triad Center (Suite 350)
Salt Lake City, UT 64180-1203

RE: Summit Coal Company

Gentlemen:

Attached you will find a revised Certificate of Insurance reflecting the 30 days notice of cancellation clause for the policy for the above captioned.

If you need anything further, give us a call.

Sincerely,

Diane M. Archick

Diane M. Archick
Agency Underwriter

dma

Attachment

cc: Summit Coal Company



CCOIC CERTIFICATE OF INSURANCE

Revised

ISSUE DATE (MM/DD/YY)

7-29-86

PRODUCER
 Evergreen Insurance Associates, Inc.
 P.O. Box 505
 Ebensburg, PA 15931

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 LETTER **A** Old Republic Insurance Company
- COMPANY LETTER **B**
- COMPANY LETTER **C**
- COMPANY LETTER **D**
- COMPANY LETTER **E**

INSURED
 Summit Coal Company
 158 E. 7800 S.
 Midvale, UT 84047

COVERAGES

THIS IS TO CERTIFY THAT 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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIABILITY LIMITS IN THOUSANDS		
					PER OCCURRENCE	AGGREGATE	
A	GENERAL LIABILITY	ZC-46767	6-10-86	6-10-87	BODILY INJURY	\$ 500,	\$ 500,
	<input checked="" type="checkbox"/> COMPREHENSIVE FORM				PROPERTY DAMAGE	\$ 500,	\$ 500,
	<input checked="" type="checkbox"/> PREMISES/OPERATIONS UNDERGROUND EXPLOSION & COLLAPSE HAZARD				BI & PD COMBINED	\$	\$
	<input checked="" type="checkbox"/> PRODUCTS/COMPLETED OPERATIONS				PERSONAL INJURY	\$	\$
	<input checked="" type="checkbox"/> CONTRACTUAL						
	<input checked="" type="checkbox"/> INDEPENDENT CONTRACTORS						
	<input checked="" type="checkbox"/> BROAD FORM PROPERTY DAMAGE						
	<input checked="" type="checkbox"/> PERSONAL INJURY						
	AUTOMOBILE LIABILITY				BI & PD COMBINED	\$	\$
	<input type="checkbox"/> ANY AUTO				PROPERTY DAMAGE	\$	\$
	<input type="checkbox"/> ALL OWNED AUTOS (PRIV. PASS.)				BI & PD COMBINED	\$	\$
	<input type="checkbox"/> ALL OWNED AUTOS (OTHER THAN PRIV. PASS.)						
	<input type="checkbox"/> HIRED AUTOS						
	<input type="checkbox"/> NON-OWNED AUTOS						
	<input type="checkbox"/> GARAGE LIABILITY						
	EXCESS LIABILITY				BI & PD COMBINED	\$	\$
	<input type="checkbox"/> UMBRELLA FORM						
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM						
	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY		
					\$	EACH ACCIDENT)	
					\$	DISEASE-POLICY LIMIT)	
					\$	DISEASE-EACH EMPLOYEE)	
	OTHER						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

Underground (Deep) Mining of Bituminous Coal

CERTIFICATE HOLDER

St. of UT Dept. of Natual Resources
 Division of Oil and Mining
 355 W.N. Temple
 3 Triad Center (Suite 350)
 Salt Lake City, Ut 64180-1203

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

James J. J. J. J.

EX-107 BOND FILE
COPY TO MINE FILE/PAN
EXP/043/002

Evergreen Insurance Associates, Inc.

P.O. Box 505, Ebensburg, PA 15931-0505 (814) 472-7961

No
Madex
Card

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