Cert. of Ins. (Part A)
Rev. 06-2017

MISSISSSIPPI DEPARTMENT OF TRANSPORTATION CERTIFICATE OF INSURANCE

FOR RAILROAD PROTECTIVE LIABILITY COVERAGE

This is to certify that the following described Liability Insurance Policy is in force at this date with limits not less than shown below.

ame and address of ailroad Company: _	Insured		
		Railroad Protective Liabi	lity
Company:			
Policy No.:			
MDOT Minimum Limits:	Without Passenger Trains \$2 With Passenger Trains \$5,00		
Railroad Specific Limits:			
Effective Date:			
Expiration Date:			
MISSI	SSIPPI DEPARTMENT OF TI	RANSPORTATION CONTI	RACI NUMBER(S)
			County (ie
Company listed and the Mis- when cancellation or expirate en (10) days prior to cancel The above policies prov	sissippi Department of Transportation, Jackion date shall be effective, unless such can lation. ide protection as is specified in Special Protailroad Protective (2017 Standard Specific	asson, Mississippi, not less than thirty da cellation is due to non-payment of prer ovision Number 907-107.14.2.2Railro	date, the company agrees to give the Railroad ays written notice sent by certified mail stating mium in which case notice will be sent at least oad Protective (2004 Standard Specifications licy terms, limits, exclusions and declarations
		Бу	Signature
		Agent's Typed Name	MS Insurance ID Number
	Addr	ess:	
		n to and subscribed before me this	
	The _	day of	,

NOTICE:

THE CONTRACTOR MUST RENEW THIS CERTIFICATE UNTIL THE CONTRACT IS ACCEPTED BY THE MISSISSIPPI DEPARTMENT OF TRANSPORTATION.

If you alter this form in any manner, it will not be accepted by the Mississippi Department of Transportation. ONLY ORIGINAL SIGNATURES WILL BE ACCEPTED.

Cert. of Ins. (Part B)

Contractor:

Rev. 06-2017

MISSISSSIPPI DEPARTMENT OF TRANSPORTATION **CERTIFICATE OF INSURANCE** FOR CONTRACTOR'S LIABILITY - RAILROAD

This is to certify that the following described Liability	Insurance Policies	are in force a	t this date with limits
not less than shown below.			
Name and address of Insured			

	Contractors Liability incl. XCU, Subcontractors, Railroad Contractual	Automobile Liability	Workers' Compensation and Employers' Liability	Excess/Umbrella Liability
Company:				
Policy No.:				
MDOT Minimum Limits:	\$1,000,000 occ. \$2,000,000 agg.	\$1,000,000 csl	Statutory: \$100,000 accident \$100,000 employee \$500,000 P. L.	\$5,000,000 occ. \$5,000,000 agg.
Railroad Specific Limits:				
Effective Date:				
Expiration Date:	PPI DEPARTMENT	OF TRANSPOR	TATION CONTRACT N	UMRED(S)
Expiration Date:	PPI DEPARTMENT	OF TRANSPOR	TATION CONTRACT N	. ,
In the event of cancelle Department of Transportation the above policies pro	ation of said policies or failure or ion, Jackson, Mississippi, not le ss such cancellation is due to non ovide protection as is specified ir	on the part of the company tess than thirty days written n-payment of premium in we not special Provision Number	o renew at expiration date, the companotice sent by certified mail stating thich case notice will be sent at least ter 907-107.14.2.2Railroad Protective er they are limited to policy terms, lin	County (ies
In the event of cancelle Department of Transportation the above policies pro	ation of said policies or failure or ion, Jackson, Mississippi, not le ss such cancellation is due to non ovide protection as is specified ir	on the part of the company tess than thirty days written n-payment of premium in we not special Provision Number	o renew at expiration date, the compa notice sent by certified mail stating thich case notice will be sent at least te er 907-107.14.2.2Railroad Protective er they are limited to policy terms, lin	County (ies
In the event of cancelle Department of Transportation the above policies pro	ation of said policies or failure or ion, Jackson, Mississippi, not le ss such cancellation is due to non ovide protection as is specified ir	on the part of the company these than thirty days written and premium in who are special Provision Number ard Specifications), however	o renew at expiration date, the compa notice sent by certified mail stating thich case notice will be sent at least te er 907-107.14.2.2Railroad Protective er they are limited to policy terms, lin	County (ies
In the event of cancelle Department of Transportation the above policies pro	ation of said policies or failure or ion, Jackson, Mississippi, not le ss such cancellation is due to non ovide protection as is specified ir	n the part of the company tess than thirty days written a-payment of premium in we ard Special Provision Number ard Specifications), however	o renew at expiration date, the compa notice sent by certified mail stating hich case notice will be sent at least te er 907-107.14.2.2Railroad Protective er they are limited to policy terms, lin	County (iest my agrees to give the Mississippe when cancellation or expiration (10) days prior to cancellation (2004 Standard Specifications its, exclusions and declarations MS Insurance ID Number
In the event of cancelle Department of Transportation the above policies pro	ation of said policies or failure or ion, Jackson, Mississippi, not le ss such cancellation is due to non ovide protection as is specified ir	n the part of the company tess than thirty days written a-payment of premium in we ard Special Provision Number ard Specifications), however	o renew at expiration date, the compa notice sent by certified mail stating thich case notice will be sent at least te er 907-107.14.2.2Railroad Protective er they are limited to policy terms, lin Signature	County (iest my agrees to give the Mississippe when cancellation or expiration (10) days prior to cancellation (2004 Standard Specifications its, exclusions and declarations MS Insurance ID Number
In the event of cancelle Department of Transportation the above policies pro	ation of said policies or failure or ion, Jackson, Mississippi, not le ss such cancellation is due to non ovide protection as is specified ir	n the part of the company tess than thirty days written appayment of premium in we are Special Provision Number and Specifications), however By: Address:	o renew at expiration date, the compa notice sent by certified mail stating thich case notice will be sent at least te er 907-107.14.2.2Railroad Protective er they are limited to policy terms, lin Signature	County (iest my agrees to give the Mississippe when cancellation or expiration (10) days prior to cancellation (2004 Standard Specifications its, exclusions and declarations MS Insurance ID Number
In the event of cancelle Department of Transportation the above policies pro	ation of said policies or failure or ion, Jackson, Mississippi, not le ss such cancellation is due to non ovide protection as is specified ir	n the part of the company these than thirty days written and an appropriate provision Number and Specifications), however By: Address: Sworn to and substitutes.	o renew at expiration date, the compa notice sent by certified mail stating thich case notice will be sent at least te er 907-107.14.2.2Railroad Protective er they are limited to policy terms, lin Signature Agent's Typed Name	County (ies ny agrees to give the Mississipp when cancellation or expiration n (10) days prior to cancellation e (2004 Standard Specifications nits, exclusions and declarations MS Insurance ID Number

NOTICE: THE CONTRACTOR MUST RENEW THIS CERTIFICATE UNTIL THE CONTRACT IS ACCEPTED BY THE MISSISSIPPI DEPARTMENT OF TRANSPORTATION.

If you alter this form in any manner, it will not be accepted by the Mississippi Department of Transportation. ONLY ORIGINAL SIGNATURES WILL BE ACCEPTED.