



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
08/02/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Willis of Colorado, Inc. c/o 26 Century Blvd P.O. Box 305191 Nashville, TN 372305191 USA	<b>CONTACT NAME:</b> <b>PHONE (A/C No. Ext):</b> 1-877-945-7378		<b>FAX (A/C, No):</b> 1-888-467-2378
	<b>E-MAIL ADDRESS:</b> certificates@willis.com		
<b>INSURED</b> US Ecology, Inc. 101 S. Capitol Blvd., Suite 1000 Boise, ID 83702	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
	<b>INSURER A:</b> Greenwich Insurance Company		22322
	<b>INSURER B:</b> XL Specialty Insurance Company		37885
	<b>INSURER C:</b> Tokio Marine Specialty Insurance Company		23850
	<b>INSURER D:</b> Everest Indemnity Insurance Company		10851
	<b>INSURER E:</b> Evanston Insurance Company		35378
<b>INSURER F:</b> Great American Insurance Company		16691	

### COVERAGES

CERTIFICATE NUMBER: W12247800

REVISION NUMBER:

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>WA Stop Gap</b>  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			GEC0001731-19	08/01/2019	08/01/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 25,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 SIR \$ 100,000
B	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> Includes Mcs 90 End <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			AEC000173219	08/01/2019	08/01/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			UEC000173619	08/01/2019	08/01/2020	EACH OCCURRENCE \$ 25,000,000 AGGREGATE \$ 25,000,000 \$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N No	N/A	WEC0001737-19	03/31/2019	03/31/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Cont Poll Prof Liab Retro Date: 08/01/96			ERAFKTK19	08/01/2019	08/01/2020	Aggregate: \$25,000,000 Each Incident \$25,000,000 Ded. Per Incident \$100,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Umbrella/Excess Policy is not over any Pollution Policy.

SEE ATTACHED

### CERTIFICATE HOLDER

### CANCELLATION

Evidence Only

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



**ADDITIONAL REMARKS SCHEDULE**

AGENCY Willis of Colorado, Inc.		NAMED INSURED US Ecology, Inc. 101 S. Capitol Blvd., Suite 1000 Boise, ID 83702	
POLICY NUMBER See Page 1		EFFECTIVE DATE: See Page 1	
CARRIER See Page 1	NAIC CODE See Page 1		

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
 FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

INSURER AFFORDING COVERAGE: Tokio Marine Specialty Insurance Company NAIC#: 23850  
 POLICY NUMBER: PPK2012582 EFF DATE: 08/01/2019 EXP DATE: 08/01/2022

TYPE OF INSURANCE:	LIMIT DESCRIPTION:	LIMIT AMOUNT:
Pollution & Remediation Legal Liability	Each Condition	\$25,000,000
	Aggregate:	\$25,000,000
	SIR:	\$250,000

INSURER AFFORDING COVERAGE: Everest Indemnity Insurance Company NAIC#: 10851  
 POLICY NUMBER: EF2CU00057-191 EFF DATE: 08/01/2019 EXP DATE: 08/01/2022

TYPE OF INSURANCE:	LIMIT DESCRIPTION:	LIMIT AMOUNT:
Excess Pollution Legal Liability	Each Claim	\$10,000,000
	Aggregate	\$10,000,000

INSURER AFFORDING COVERAGE: Evanston Insurance Company NAIC#: 35378  
 POLICY NUMBER: MKLV5EFX100432 EFF DATE: 08/01/2019 EXP DATE: 08/01/2022

TYPE OF INSURANCE:	LIMIT DESCRIPTION:	LIMIT AMOUNT:
Excess Pollution Legal Liability	Each Claim	\$15,000,000
	Aggregate	\$15,000,000

INSURER AFFORDING COVERAGE: Great American Insurance Company NAIC#: 16691  
 POLICY NUMBER: IMP 4105624-04 EFF DATE: 08/01/2019 EXP DATE: 08/01/2020

TYPE OF INSURANCE:	LIMIT DESCRIPTION:	LIMIT AMOUNT:
Truck Cargo Coverage	Any One Truck	\$250,000
	Catastrophe Limit	\$250,000
	Deductible:	\$250



**ADDITIONAL REMARKS SCHEDULE**

AGENCY Willis of Colorado, Inc.		NAMED INSURED US Ecology, Inc. 101 S. Capitol Blvd., Suite 1000 Boise, ID 83702	
POLICY NUMBER See Page 1		NAIC CODE See Page 1	
CARRIER See Page 1		EFFECTIVE DATE: See Page 1	

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

INSURER AFFORDING COVERAGE: Endurance American Specialty Insurance Company NAIC#: 41718  
 POLICY NUMBER: EXC10007540504 EFF DATE: 08/01/2019 EXP DATE: 08/01/2020

TYPE OF INSURANCE:	LIMIT DESCRIPTION:	LIMIT AMOUNT:
Excess Umbrella - 2nd Layer	Each Occurrence:	\$4,000,000
	Aggregate:	\$4,000,000

INSURER AFFORDING COVERAGE: Lloyd's NAIC#: B7874  
 POLICY NUMBER: B080119523U19 EFF DATE: 08/01/2019 EXP DATE: 08/01/2020

TYPE OF INSURANCE:	LIMIT DESCRIPTION:	LIMIT AMOUNT:
Equipment Floater	Contractor's Equipmen	\$5,000,000
	Leased/Rented	\$5,000,000
	Unscheduled	\$200,000

ADDITIONAL REMARKS:  
 Deductible \$10,000, Crane Deductible - \$25,000  
 All Risk of Direct Loss or Damage subject to a \$5,000,000 Catastrophe Limit

**US ECOLOGY, INC.  
NAMED INSURED SCHEDULE – CASUALTY**

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US Ecology, Inc.  
American Ecology Corporation  
American Ecology Environmental Services Corporation  
US Ecology Idaho, Inc.  
US Ecology Nevada, Inc.  
US Ecology Texas, Inc.  
US Ecology Washington, Inc.  
US Ecology Field Services, Inc.  
US Ecology Michigan, Inc. dba: Dynecol  
US Ecology Vernon, Inc.  
US Ecology Illinois, Inc.  
American Ecology Recycle Center, Inc.  
US Ecology Thermal Services, Inc  
US Ecology Winnie, LLC  
Ecoserve Industrial Disposal, LLC  
US Ecology Transportation Solutions, Inc.

As respects to Excess Liability, the following is a Named Insured:

Stablex Canada, Inc. Environmental Services Inc.
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