

CERTIFICATE OF INSURANCE FOR CLOSURE OR POST-CLOSURE CARE

NAME AND ADDRESS OF INSURER: Great American E&S Insurance Company,
(HEREIN CALLED THE "INSURER") 301 E. 4th Street, Cincinnati Ohio 45202

NAME AND ADDRESS OF INSURED: US Ecology, Inc.
(HEREIN CALLED THE "INSURED") 101 S. Capitol Blvd., Suite 1000
Boise ID 83702

Facilities Covered:

	<u>Closure Amount</u>	<u>Post Closure Amount</u>	<u>Total</u>
EPA ID NO.: <u>IDD073114654</u> Name: US Ecology Idaho, Inc. Address: 20400 Lemely Road City: Grand View, ID 83706	\$23,156,182	\$10,755,520	\$33,911,702
TSCA	\$124,621	\$0	\$124,621
EPA ID NO.: <u>IDD00773952</u> Name: US Ecology Idaho, Inc. Address: State Route 51 City: Bruneau, ID	\$0	\$514,616	\$514,616

Face Amount: \$34,550,939

Policy Number: CPC 1827641 05


Effective Date: December 19, 2018

The Insurer hereby certifies that it has issued to the Insured the policy of insurance identified above to provide financial assurance for closure and post-closure care for the facilities identified above. The Insurer further warrants that such policy conforms in all respects with the requirements of IDAPA 58.01.05.008 and 58.01.05.009 (40 CFR 264.143(e), 264.145(e), 265.143(d), and 265.145(d)), as applicable and as such regulations were constituted on the date shown immediately below. It is agreed that any provision of the policy inconsistent with such regulations is hereby amended to eliminate such inconsistency.

Whenever requested by the Director of the Idaho Department of Environmental Quality, herein called IDEQ, the Insurer agrees to furnish to the IDEQ a duplicate original of the policy listed above, including all endorsements thereon.

I hereby certify that the wording of this certificate is identical to the wording specified in IDAPA 58.01.05.008 (40 CFR 264.151(e)) as such regulations were constituted on the date shown immediately below.

Name: (Authorized signature for Insurer): 
Typed Name: Rick Ringenwald
Title: Vice President

Signature of Witness or Notary: 
Date: 7/5/19

