



Knowledge is Powerful



Herc Rentals Certificate of Insurance Requirements

01 Insurance information needs to be presented on a Certified of Insurance (COI) document.

02 The producer of the document must be clearly stated. The proper name who produced the document, along with city, state, and zip code.

03 The insured's name must match exactly as they are set up with Herc Rentals Inc. The address, city, state and zip code need to be included.

04 The insurer's coverage(s) needs to be outlined in this location.

05 General Liability is mandatory for all customers. We will always refer to the earliest expiration date if each policy has a different date. Please note that we require a complete COI each time one policy expires.

- The minimum coverage for General Liability per occurrence is \$1M.
- General Aggregate is mandatory and the minimum requirement for all customers is \$2M.
- Automobile Liability is not a requirement for those customer's looking to only rent equipment. However, if a customer is looking to rent any commercial truck(s), the minimum requirement is \$1M, combined single limit per accident. All Auto's must be checked or Hired Auto's and Non-Owned Auto's must be checked.
- Inland Marine Contractors' Equipment Policy or a similar policy is required to rent equipment. Our minimum requirement is \$25K, however we require enough coverage to cover the replacement value of the type of equipment a customer rents. Other types of policies are acceptable as long as they specifically state leased/rented equipment coverage.

06 Herc Rentals Inc. should be listed as the additional insured and loss payee where applicable.

07 The Certificate Holder must be completed with our company name, Herc Rentals Inc., and our address. This area is mandatory.

08 Authorized signature is mandatory and should include a signature by the individual who is certifying the information provided is accurate.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/16/2023

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).

PRODUCER Iceland Insurance 32221 Lindy Lane Rock Hill, SC 245789	Contact Name: Nova Green	
	Phone NO: 807-325-7782	FAX (A/C, No): 866-878-2666
	Email Address: Nova.Green@IcelandInsurance.com	
	INSURER(S) AFFORDING COVERAGE 4	
	NAIC #	
	INSURER A : Liberty Mutual Insurance	
INSURED Donald's Excavators 345678 Treeline Road Rock Hill, SC 245788	INSURER B : Travelers Insurance	
	INSURER C :	
	INSURER D :	
	INSURER F :	
	REVISION NUMBER:	
	CERTIFICATE NUMBER:	

COVERAGES 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	
5 A	COMMERCIAL GENERAL LIABILITY			BKS57220573	03/16/2023	03/16/2024	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea. occurrence)	\$ 300,000
	GEN'L AGGREGATE LIMIT APPLIES PER:	X	X				MED EXP (Any one person)	\$ 15,000
	POLICY PROJECT LOC						PERSONAL & ADV INJURY	\$ 1,000,000
	OTHER:						GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
5	AUTOMOBILE LIABILITY				03/16/2023	03/16/2024	COMBINED SINGLE LIMIT (Ea. accident)	\$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	OWNED AUTOS ONLY	<input type="checkbox"/>	SCHEDULED AUTOS				BODILY INJURY (Per accident)	\$
	HIRED AUTOS ONLY	<input type="checkbox"/>	NON-OWNED AUTOS ONLY				PROPERTY DAMAGE (Per accident)	\$
								\$
5	UMBRELLA LIAB						EACH OCCURRENCE	\$
	EXCESS LIAB						AGGREGATE	\$
	DED		RETENTION \$					\$
5 B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC33214994578001	05/16/2023	05/16/2024	PER STATUTE	OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y / <input checked="" type="checkbox"/> N	N/A				E.L. EACH ACCIDENT	\$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$ 500,000
							E.L. DISEASE - POLICY LIMIT	\$ 500,000
5 C	Inland Marine Policy			BL3K112RE	03/16/2023	03/16/2024	\$25,000 MINIMUM BUT MUST EQUAL REPLACEMENT COST OF EQUIPMENT ON RENT	\$200,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
HERC RENTALS INC. IS INCLUDED AS ADDITIONAL INSURED IN REGARD TO GENERAL LIABILITY AND AUTO LIABILITY WHEN REQUIRED BY WRITTEN CONTRACT. HERC RENTALS INC. IS INCLUDED AS THE LOSS PAYEE IN REGARDS TO LEASE/RENTED EQUIPMENT

CERTIFICATE HOLDER	CANCELLATION
Herc Rentals Inc. 27500 Riverview Center Blvd. Blvd. Bonita Springs, Florida 34134	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 <i>Nova Green</i> 8