

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE: 12/03/01


PRODUCER SCOTT PEARCEY 2205 1 ST AVENUE GREELEY, CO 80631	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.
	INSURERS AFFORDING COVERAGE
INSURED EARTH ENTERPRISES INC PO BOX 280 PIERCE, CO 80650	INSURER A: COLORADO FARM BUREAU MUTUAL INSURANCE CO
	INSURER B:
	INSURER C:
	INSURER D:

COVERAGES:

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GENTL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	CC354954	11/09/2001	11/09/2002	EACH OCCURRENCE	\$1,000,000
	FIRE DAMAGE (ANY ONE FIRE)				\$100,000	
	MED EXP (ANY ONE PERSON)				\$5,000	
	PERSONAL & ADV INJURY				\$1,000,000	
	GENERAL AGGREGATE				\$2,000,000	
	PRODUCTS - COMP/OP AGG				\$2,000,000	
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	CC354954	11/09/2001	11/09/2002	COMBINED SINGLE LIMIT (PER ACCIDENT)	\$500,000
	BODILY INJURY (PER PERSON)				\$	
	BODILY INJURY (PER ACCIDENT)				\$	
	PROPERTY DAMAGE (PER ACCIDENT)				\$	
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
	OTHER THAN AUTO ONLY				\$	
A	EXCESS LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$10,000	UM359003	11/09/2001	11/09/2002	EACH OCCURRENCE	\$1,000,000
	AGGREGATE				\$1,000,000	
					\$	
					\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMIT	\$
	E.L. ACCIDENT				\$	
	E.L. DISEASE - EA EMPLOYEE				\$	
	E.L. DISEASE - POLICY LIMIT				\$	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLE/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 RECYCLING COLLECTION

CERTIFICATE HOLDER CITY OF FORT COLLINS PO BOX 580 FT COLLINS, CO 80522-0508	ADDITIONAL INSURED; INSURER LETTER: X	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30-DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 
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ACORD 25-S (7/97)

ACORD CORPORATION 1988