

MARSH**CERTIFICATE OF INSURANCE**CERTIFICATE NUMBER
NYC-001601049-09**PRODUCER**MARSH USA Inc.
44 WHIPPANY ROAD
PO BOX 1966
MORRISTOWN, NJ 07962-1966
ADAM BEAUSOLEIL FAX: (203) 229-6883
E-MAIL: CERT.REQUESTNE@MARSH.COM

J01420-EXCES-PXEN-04/05 HEMP

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE POLICY. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES DESCRIBED HEREIN.

COMPANIES AFFORDING COVERAGE

COMPANY

A ZURICH INSURANCE COMPANY

COMPANY

B AMERICAN GUARANTEE & LIABILITY INS. CO.

COMPANY

C N/A

COMPANY

D**INSURED**AMERICAN REF-FUEL COMPANY ESSEX COUNTY
183 RAYMOND BLVD.
NEWARK, NJ 07105**COVERAGES**

This certificate supersedes and replaces any previously issued certificate for the policy period noted below.

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THIS IS TO CERTIFY THAT POLICIES OF INSURANCE DESCRIBED HEREIN HAVE BEEN ISSUED TO THE INSURED NAMED HEREIN FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, CONDITIONS AND EXCLUSIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS		
A	GENERAL LIABILITY	GLO 2392351-06	01/01/04	01/01/05	GENERAL AGGREGATE	\$ 2,000,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG	\$ 1,000,000	
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY	\$ 1,000,000	
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	\$ 1,000,000	
					FIRE DAMAGE (Any one fire)	\$ 1,000,000	
					MED EXP (Any one person)	\$ 5,000	
B	AUTOMOBILE LIABILITY	BAP 2725671-06 (A/S) MA 2392350-06 (MA)	01/01/04	01/01/05	COMBINED SINGLE LIMIT	\$ 1,000,000	
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$	
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$	
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE	\$	
	<input type="checkbox"/> HIRED AUTOS						
	<input type="checkbox"/> NON-OWNED AUTOS						
	<input checked="" type="checkbox"/> COMP/COLL						
<input type="checkbox"/> SELF INSURED	"SELF INSURED FOR" "PHYSICAL DAMAGE"						
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:		
	<input type="checkbox"/>				EACH ACCIDENT	\$	
	<input type="checkbox"/>				AGGREGATE	\$	
B	EXCESS LIABILITY	EOG 289431605	01/01/04	01/01/05	EACH OCCURRENCE	\$ 5,000,000	
	<input checked="" type="checkbox"/> UMBRELLA FORM				AGGREGATE	\$ 5,000,000	
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM					\$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC 2392349-06	01/01/04	01/01/05	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	<input type="checkbox"/> OTHER	
					EL EACH ACCIDENT	\$ 1,000,000	
					EL DISEASE-POLICY LIMIT	\$ 1,000,000	
					EL DISEASE-EACH EMPLOYEE	\$ 1,000,000	
	OTHER						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

" EVIDENCE OF INSURANCE "

CANCELLATIONSHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER AFFORDING COVERAGE, ITS AGENTS OR REPRESENTATIVES, OR THE ISSUER OF THIS CERTIFICATE.

MARSH USA INC.

BY: Jura Slattery

MM1(3/02)

Jura Slattery

VALID AS OF: 12/31/03