



# CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS 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 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:

Agent Name  
Street Address  
City, State, Zip Code

## INSURED:

Motor Carrier Business Name  
Street Address  
City, State, Zip Code

CONTACT NAME:	Insurance Agent Contact
PHONE (A/C. No. Ext.):	Insurance Agent Phone Number
E-MAIL ADDRESS:	Insurance Agent Email
FAX (A/C. No.):	
INSURER(S) AFFORDING COVERAGE	
INSURER A:	NAIC #
INSURER B:	NAIC #
INSURER C:	NAIC #
INSURER D:	NAIC #
INSURER E:	NAIC #
INSURER F:	NAIC #

## REVISION NUMBER:

## COVERS

## CERTIFICATE 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.

INSURER LINES	TYPE OF INSURANCE	ADD'L SUBR. INSR. WYD	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY					EACH OCCURRENCE	\$ 1,000,000
	X COMMERCIAL GENERAL LIABILITY	X X	Policy Number	MM/DD/YYYY	MM/DD/YYYY	DAMAGE TO RENTED PREMISES (Ex occurrence)	\$
	CLAIMS-MADE	X OCCUR				MED EXP (Any one person)	\$
						PERSONAL & ADV INJURY	\$
						GENERAL AGGREGATE	\$ 2,000,000
						PRODUCTS - COMP/OP AGG	\$ Included
							\$
	GEN. AGGREGATE LIMIT APPLIES PER:						
	X POLICY	PRO- JECT					
		LOC					
A	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ex accident)	\$ 1,000,000
	X ANY AUTO		X X	Policy Number	MM/DD/YYYY	MM/DD/YYYY	
	ALL OWNED AUTOS	SCHEDULED AUTOS				BODILY INJURY (Per person)	\$
	Hired Autos	NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
							\$
	UMBRELLA/LIAB		OCCUR			EACH OCCURRENCE	\$
	EXCESS LIAB		CLAIMS-MADE			AGGREGATE	\$
	DED	RETENTION \$					\$
A	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY	Y/N	N/A	X	Policy Number	WC STATUTORY LIMITS	OTHR-
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N*			MM/DD/YYYY	MM/DD/YYYY	ER
	If yes, describe under DESCRIPTION OF OPERATIONS below						
						E.L. EACH ACCIDENT	\$ 100,000
						E.L. DISEASE - EA EMPLOYEE	\$ 100,000
						E.L. DISEASE - POLICY LIMIT	\$ 500,000
A	Motor Truck Cargo					Limit: \$100,000 Per Truck	
A	Occupational Accident (Only required if any Proprietor/Partner/Executive Officer/Member excluded on WC)					Combined Single Limit: \$1,000,000	

## DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

RXO Last Mile, Inc., its affiliates and all customers are listed as Additional Insured with respect to General Liability per CG2026 & CG2037. General liability is hereby endorsed including completed operations. RXO Last Mile, Inc., its affiliates and all customers are listed as Additional Insured with respect to Auto Liability per CA2048. Waiver of Subrogation is included on Auto Liability, General Liability & Workers Compensation in favor of RXO Last Mile, Inc., its affiliates and all customers. Coverage under General Liability & Auto Liability is considered Primary & Non-Contributory. No water Damage Exclusions on General Liability. 30 Day Notice of Cancellation to the certificate holder is included on all policies.

Note : VIN must be specified if Auto Liability policy symbol is Scheduled Auto.

## CERTIFICATE HOLDER

RXO Last Mile, Inc. and its affiliates and customers  
C/O RXO Last Mile Compliance PHPI  
222 Gateway Rd. W.  
Napa, CA 94558

## CANCELLATION

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

Authorized Representative Signature