DEP Form # 62-730.900(4)(p) Form Title: HWF Liability Surety Bond

Effective Date: 1-29-06 DEP Application #

STATE OF FLORIDA HAZARDOUS WASTE FACILITY SURETY BOND TO DEMONSTRATE LIABILITY COVERAGE

Surety Bond #					
Parties					. Principal.
	[Name and Address of the Owner or Operator]				
meorporated in	[State of Incorporation	01	[City and State o	f Principal Place of Business]	and
	[Name and A	ddress of Surety Co	ompany(ies)]		· · · · · · · · · · · · · · · · · · ·
Surety Company(ies)	of	[Surety's(i	es') Place of Business]		,
List the EPA identification	ation number n	ame and add	ress of each fac	ility guaranteed by f	his bond:
Elst the El 71 Identified					- Ins bolid.
		Sudden		Nonsudden	
		Accidental Occurrences		Accidental Occurrences	
Penal Sum Per Occurrence	e \$			<u> </u>	
Annual Aggregate	\$			8	

Purpose : This is an agreement between the Surety(ies) and the Principal under which the	2
Surety(ies), its(their) successors and assignees, agree to be responsible for the payment o against the Principal for bodily injury and/or property damage to third parties ca accidental occurrences arising from operations of the fa	f claims used by
["sudden" and/or "nonsudden"] group of facilities in the sums prescribed herein; subject to the governing provisions following conditions.	and the
Governing Provisions:	
 Section 3004 of the Resource Conservation and Recovery Act of 1976, as amended. Rules and regulations of the U.S. Environmental Protection Agency (EPA), particular CFR Part 264.147 or 265.147. 	:ly 40
(3) Rules and regulations of the Florida Department of Environmental Protection (FDEP) particularly Chapter 62-730 of the Florida Administrative Code (F.A.C.).),
Conditions: (1) The Principal is subject to the applicable governing provisions that require the Princip have and maintain liability coverage for bodily injury and property damage to third procused by accidental occurrences arising from operation of the facility or group of facilities. Such obligation does not apply to any of the followay Bodily injury or property damage for which	arties ations
is obligated to pay damages by reason of the assumption of liability in a control or agreement. This exclusion does not apply to liability for damages that	
agreement.	
[Principal] (b) Any obligation of under a work [Principal]	cers'
compensation, disability benefits or unemployment compensation law or similar law. (c) Bodily injury to:	
(i) An employee of arising from	m, and
in the course of, employment by	
Or [Principal]	
(ii) The spouse, child, parent, brother or sister of that employee as a consequence of, or a from, and in the course of employment by	rising
This exclusion applies:	
(A) Whether	
(B) To any obligation to share damages with or repay another person who must pay because of the injury to persons identified in paragraphs (i) and (ii).	damages
D 2 6 5	

(d) Bodily injury or property damage arising out of the centrustment to others of any aircraft, motor vehicle of			enance,	use or		
(e) Property damage to:						
(i) Any property owned, rented or occupied by		[Princi	ipal]			_;
(ii) Premises that are sold, given away or abandoned by						
if the property damage arises out of any part of those	e premises	;				
(iii) Property loaned to						;
(iv) Personal property in the care, custody or control of _						;
(v) That particular part of real property on which						
or any contractors or subcontractors working	directly	[Princ or in		on	behalf	of
(3) If the Principal fails to satisfy a valid third party Surety(ies) becomes liable on this bond obligation. (4) The Surety(ies) shall satisfy a third party liability c following documents: (a) Certification from the Principal and the third party of be paid. The certification must be worded as follows Certification of Va The undersigned, as parties	laim only claimant(s : alid Clair	upon to that to	the recei	pt of	one of	the
[Name and Address of Third Party C	Claimant(s)]					
hereby certify that the claim of bodily injury aaccidental occurrence arising from operatinghazardous waste treatment, storage or disposal fac \$	[Pri	ncipal's]	[suc	lden or n	onsudden]	_
[Signature of the Principal]				[Date]		
[Signature of the Notary]			[Da	te]		

[Signature(s)]	[Name and Address]		
[Type Name(s) & Title(s)]			
	State of Incorporation:		
Corporate Seal			
	Liability Limit: \$		
	[Signature(s)]		
Bond Premium:\$			
	[Name(s) & Title(s)]		
	Corporate seal		