



**INSURANCE CERTIFICATION
CITY OF VINELAND
TOWING OPERATOR/FACILITY LICENSE
ORDINANCE NO 2006-99**

Company Name: _____

Agency/Company: *(Issuing Insurance Card)*

Name: _____ Policy #: _____

Address: _____ Expires: _____

I certify that the above referenced company is duly licensed to transact business under the insurance laws of the State of New Jersey and that the above referenced insurance policy provides for coverage as required by Ordinance No. 2006-99 in a sum of not less than as follows:

1. Automobile Liability in an amount not less than \$500,000. Combined single limits.
2. Workers Compensation coverage, as required by statute
3. Garage Keepers Legal Liability in an amount not less \$100,000. Per location.
4. Garage Liability, including Cargo Insurance, in an amount lot less than \$1,000,000. combined single limit.

I further certify that the above referenced insurance policy provides for the following:

1. Certificate of Insurance provided for one year term, with a thirty (30) day Notice of Cancellation, naming the Cit of Vineland as a Certificate Holder
2. Coverage Including property owned by others which is in the care, custody of the towing operator
3. Coverage including the Perils of Transportation for any motor vehicle in the possession or control of the towing operator
4. Garage Keeper's Legal Liability includes Comprehensive and Collision coverage

I attest that the above referenced insurance policy:

1. Names the City of Vineland as an additional insured and provides that the Insurance Company will pay on behalf of the City for any and all claims against the City resulting from the operations of the towing operator
2. May not be cancelled or materially changed without thirty (30) days prior written notice to the Director of Licenses and Inspections.

Owner/ Authorized Representative -- *(Print Name)*

Owner/ Authorized Representative -- *(Signature)*

Date: _____