

## Florida Department of Agriculture and Consumer Services Division of Agricultural Environmental Services

## **CERTIFICATE OF INSURANCE**

Rules 5E-14.142 and 5E-14.117, F.A.C. Telephone: (850) 617-7997; Fax (850) 617-7967 Respond to:

Bureau of Licensing and Enforcement 3125 Conner Blvd., Bldg. 8, Tallahassee, FL 32399-1650

Policy expiration date

## Please check the type of business your insurance is applicable to:

Commercial Landscape Maintenance Commercial Wildlife Management

Insured:	PRODUCER: (Insurance Agent)
Company Name	Company Name
Company Business Location Address	Company Business Location Address
City, State, Zip Code	City, State, Zip Code
Individual's Name (for Landscape and Wildlife applicants)	Insured Company Affording Coverage:
	Company Name

Policy effective date

Section(s) 482.071(4), 482.156(2)(a), and 482.157(2)(c), Florida Statutes, states, in part, "Each person making application for certification under this section must furnish proof of having a certificate of insurance, as required by Section 482.071(4), Florida Statutes", which states that the employer or individual meets the requirements for minimum

- (A) Bodily injury: \$250,000 each person and \$500,000 each occurrence; and Property damage: \$250,000 each occurrence and \$500,000 in the aggregate; or
- (B) Combined single-limit coverage: \$500,000 in the aggregate.

financial responsibility for bodily injury and property damage consisting of:

The insured's coverage meets or exceeds the minimum statutory requirement as stated above:

Authorized Insurance Representative

## CERTIFICATE HOLDER

Policy Number

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