

L14RZDCF92C/POLICY/20181204/78218

## CERTIFICATE OF INSURANCE

REF :

DATED :

ASSURED :

ADDRESS :

ASSURED'S COUNTRY :

VESSEL NAME	TYPE	BUILT	GT	CLASS	FLAG	PORT	IMO

### EVIDENCE OF INSURANCE

This is to confirm that cover is in place, as per the Terms and Conditions itemised below. The Underwriters of this insurance are identified below under Security. This Certificate of Insurance or any Endorsement hereto is evidence only of the contract of indemnity insurance between the above named Assured(s) and the Insurer(s) and shall not be construed as evidence of any undertaking, financial or otherwise, on the part of the Insurer(s) to any other party.

PERIOD :            DATE OF COVER

<b>LIMIT OF LIABILITY:</b>	
<b>CONDITIONS:</b>	
<b>SPECIAL CONDITIONS:</b>	
<b>WARRANTIES:</b>	
<b>DEDUCTIBLE(S):</b>	

<b>PREMIUM:</b>	

<b>PREMIUM:</b>	
<b>SECURITY:</b>	

Signed

NAME OF UNDERWRITER

DATE

Lodestar Marine Limited