IN WASHINGTON P.O. Box 729 Kirkland, WA 98083-0729 (206) 883-8702 X (206) 869-4043



## CRUMP E&S NORTHWEST. INC.

IN OREGON P.O. Box 4486 Portland, OR 97208-4486 (503) 293-9555 FAX (503) 293-9556

## INSURANCE BINI

Date of Issuance:

DECEMBER 10. 1991

Binder No.

011431

In accordance with your instructions and in reliance upon the statements made in your application, insurance is effected as follows: insurer(s):

NATIONAL INDEMNITY CO.

Assigned Policy(ies) or Certificate(s) number(s): TR328612

Name of Insured:

KLEENWELL BIOHÁZARD

Mailing Address:

17800 DES MOINES MEMORIAL DR

SUITE A SEATTLE, WA 98148

Binder Photod From: DECEMBER 15 1991 12:01 A.M. To: JANUARY 15 1992 12:01 A.M.

Standard Time at the address as stated above/at the location of property or interest(s) insured. This binder will be terminated upon delivery of formal policy(ies) or Certificate(s) issued.

Coverage:

COMMERCIAL AUTO LIABILITY

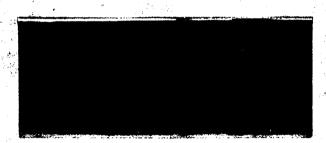
Limit(s) of Liability or Amount(s) of Insurance:

1+000+000 CSL; 25+000/50+000/10+000 UM BI/PD:

Conditions and/or Exclusions:

50 MILE RADIUS

SIR/DEDUCTIBLE NOT APP



WUTC	
Cause No	上
Witness	+
Date	F

Policy Period From:

Policy Period From: DECEMBER 15, 1991 12:01 A.M. To: Standard Time at the address as stated above/at the location of property or interest(s) insured.

DECEMBER 15.

12:01 A.M.

Policy Premium: \$ Minimum Earned Premium:

3,018.00 \$250.00

Fees: \$ 8.28%

sulchem

Rate of Adjustment:

Premium Basis:

Estimated Exposure:

Producer/Broker:

GLENDALE-HILINE INS. AGENCY 201 S.W. 153RD P.O. BOX 66246 BURIEN WA 98166

MICHAEL MILCHEN

Cancellation: This binder may be cancelled by the insured by surrender thereof to Crump E&S Northwest, Inc. or any of its authorized representatives, or by mailing to cump E&S Northwest, Inc. written notice stating when thereafter the cancellation shall be effective. THE INSURANCE UNDER THIS BINDER CANNOT ANCELLED FLAT; earned premium must be paid for the time that insurance has been in force. This binder may be cancelled by Crump E&S Northwest, by mailing to the insured at the address stated on this binder, written notice stating when not less than ten (10) days thereafter, such cancellation shall be effective. The mailing of notice as aforesaid shall be sufficient proof of notice. Delivery of such written notice either by the insured or by Crump E&S Northwest, Inc. shall be equivalent to mailing. In the event of cancellation by the insured, the earned premium will be computed short-rate in accordance with the company's customary short-rate table, subject to a minimum premium if applicable, and if cancelled by the insurer(s), the earned premium will be computed pro-rata.