



## CERTIFICATE OF INSURANCE FORM

This verification must be completed and submitted by the insurance agent / representative.

Pest Control Company Name		Address
City	State	Zip Code
Name of Insurance Company		Address
Insurance Company NAIC#	Per Occurrence Limit	Aggregate Limit
Policy Number	Effective Date	Expiration Date
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Policy Number	Effective Date	Expiration Date

### Coverage and Limits of Insurance Required

Louisiana Law requires all Pest Control Operators to obtain and maintain Insurance with minimum coverage limits listed below:

1. Not less than \$250,000, public / general liability coverage, per accident / occurrence for the following:
  - a. all work performed under specific structural pest control license phases.
2. not less than \$100,000 coverage for property damage;
3. or combined single limits of \$350,000

#### **Statement of Insurance Agent Representative of Pest Control Operator:**

The undersigned is the insurance agent representative of the Pest Control Company named above. The insurance provided to the referenced Pest Control Company by the Insurer(s) listed, covers all types of work performed under specific structural pest control license phases and contain limits of not less than \$100,000 for property damage, not less than \$250,000 for public / general liability per accident / occurrence or combined single limits of \$350,000. This certificate does not affirmatively or negatively amend, extend, or alter the coverage afforded by the referenced policy(s).

Agent Signature	Date
Insurance Agent Name	
Insurance Agency Name	Address
City	State Zip