



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/26/2026

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Marsh & McLennan Agency LLC 13155 Noel Road, Suite 1400 Dallas TX 75240	CONTACT NAME: PHONE (A/C, No, Ext): 972-770-1600 FAX (A/C, No): E-MAIL ADDRESS: swinfo@marshmma.com
INSURED Huitt-Zollars, Inc. 5430 LBJ Freeway, Suite 1500 Dallas TX 75240	INSURER(S) AFFORDING COVERAGE INSURER A: Hartford Casualty Insurance Company INSURER B: Hartford Underwriters Insurance Company INSURER C: Hartford Fire Insurance Company INSURER D: Trumbull Insurance Company INSURER E: INSURER F:
	NAIC # 29424 30104 19682 27120

COVERAGES**CERTIFICATE NUMBER:** 883175703**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PRO-JECT ☒ LOC ☐ OTHER:			46UUNOL6HGL	9/1/2026	9/1/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Deductible \$ \$0
D	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☒ HIRED AUTOS ONLY ☒ Coll \$1K/\$2K ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS ONLY ☒ Comp \$1K/\$2K			46UENOL6JG2	9/1/2026	9/1/2027	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	☒ UMBRELLA LIAB ☒ EXCESS LIAB ☐ DED ☒ RETENTION \$ 10,000	☒ OCCUR ☐ CLAIMS-MADE		46XHUOL6HJF	9/1/2026	9/1/2027	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
B	☒ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	☐ Y ☒ N	N/A	46WEOL6H1G	9/1/2026	9/1/2027	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D A C	Hired Car Phys. Dam.: \$100,000 Valuable Papers Employee Theft			46UENOL6JG2 46UUNOL6HGL 46KB067367126	9/1/2026 9/1/2026 9/1/2026	9/1/2027 9/1/2027 9/1/2027	Hired PD Comp/Coll Limit Each Occurrence Ded. \$1,000/\$1,000 Included in BPP \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Additional Insured form #HG0001 edition 09/16 applies to the General Liability policy.
Waiver of subrogation form #HG0001 edition 09/16 applies to the General Liability policy.
Primary & Non-Contributory General Liability form #HG0001 edition 09/16.

Additional Insured form #HA9916 edition 12/21 applies to the Automobile Liability policy.
Waiver of subrogation form #HA9916 edition 12/21 applies to the Automobile Liability policy.
Primary & Non-Contributory Auto Liability form #HA9916 edition 12/21.

See Attached...

2026 SEP 15 PM2:14
OKLAHOMA CITY CLERK**CERTIFICATE HOLDER****CANCELLATION**

City of Oklahoma City & Oklahoma Water Utilities Trust
420 W. Main St., Ste. 700
Oklahoma City OK 73102

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY Marsh & McLennan Agency LLC		NAMED INSURED Huitt-Zollars, Inc. 5430 LBJ Freeway, Suite 1500 Dallas TX 75240	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** CERTIFICATE OF LIABILITY INSURANCE

Waiver of subrogation forms #WC000313, #WC040306 and #WC420304B apply to the Workers Compensation policy.

Additional Insured form #XL0003 edition 09/16 applies to the Umbrella policy.
Waiver of Subrogation form #XL0003 edition 09/16 applies to the Umbrella policy.

Notice of Cancellation form #IH0307 edition 6/11 applies to the General Liability policy.
Notice of Cancellation form #IH0307 edition 06/11 applies to the Auto Liability policy.
Notice of Cancellation forms #WC990394 and #WC990531 apply to the Workers Compensation policy.
Notice of Cancellation form #IH0307 edition 6/11 applies to the Umbrella Liability policy.

The General Liability policy contains language that provides additional insured status to the certificate holder only when there is a written contract between the named insured and the certificate holder that requires such status.

The General Liability policy contains an endorsement with "Primary and NonContributory" wording that may apply only when there is a written contract between the named insured and the certificate holder that requires such wording.

The General Liability policy contains a blanket waiver of subrogation endorsement that may apply only when there is a written contract between the named insured and the certificate holder that requires such wording.

The Automobile Liability policy contains language that provides additional insured status to the certificate holder only when there is a written contract between the named insured and the certificate holder that requires such status.

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The Umbrella policy includes additional insured endorsement to the certificate holder only when there is a written contract between the named insured and the certificate holder that requires such status.

The Umbrella policy includes waiver of subrogation endorsement to the certificate holder only when there is a written contract between the named insured and the certificate holder that requires such status.

The Worker's Compensation policy includes a waiver of subrogation endorsement that may apply only when there is a written contract between the named insured and the certificate holder that requires such wording.

The General Liability, Auto Liability, Worker's Compensation and Umbrella Liability policies include a blanket notice of cancellation to the certificate holder endorsement, providing for (30) days' advance written notice if the policy is canceled by the company, or 10 days' written notice before the policy is canceled for nonpayment of premium. Notice is sent to certificate holders with mailing addresses on file with the agent or the company. The endorsement does not provide for notice of cancellation to the certificate holder if the named insured requests cancellation.

Workers' Compensation has \$0 Self-Insured Retention

RE: WC-0855 42 inch Water Transmission Main Extension.

Certificate Holder Includes: City of Oklahoma City & Oklahoma Water Utilities Trust.



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INSURED Huitt-Zollars, Inc. 5430 LBJ Freeway, Suite 1500 Dallas TX 75240	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : Hartford Casualty Insurance Company	29424
	INSURER B : Hartford Underwriters Insurance Company	30104
	INSURER C : Hartford Fire Insurance Company	19682
	INSURER D : Trumbull Insurance Company	27120
	INSURER E :	
	INSURER F :	

COVERAGES**CERTIFICATE NUMBER:** 594640769**REVISION NUMBER:**

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D	Hired Car Physical Dam: \$100,000		46UENOL6JG2	9/1/2026	9/1/2027	Hired PD Comp/Coll	Ded \$1,000/\$1,000
C	Employee Theft		46KB067367126	9/1/2026	9/1/2027	Employee Theft	Limit: \$1,000,000
A	Valuable Papers		46UUNOL6HGL	9/1/2026	9/1/2027	Included in BPP Limit	

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AGENCY CUSTOMER ID: _____

LOC #: _____



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