



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/26/2025

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 RCP, Alera Group, LLC 8182 Maryland Ave. Suite 250 Clayton MO 63105 | CONTACT NAME: PHONE (A/C, No, Ext): 314-678-1200 FAX (A/C, No): 214-853-5920 E-MAIL ADDRESS: |
| INSURED Superior Environmental Solutions, LLC 9996 Joseph James Dr Cincinnati OH 45246 | INSURER(S) AFFORDING COVERAGE INSURER A: Steadfast Insurance Company INSURER B: Zurich American Insurance Company INSURER C: Illinois Union Insurance Company INSURER D: INSURER E: INSURER F: |

License#: 20020393
SESHOLD-01**COVERAGES****CERTIFICATE NUMBER:** 502520163**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 | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER: | Y | Y | GPL5681905-00 | 6/30/2025 | 6/30/2026 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Retention \$ 25,000 |
| B | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY | Y | Y | BAP5681903-00 | 6/30/2025 | 6/30/2026 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| A | <input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0 | Y | Y | SXS5681906-00 | 6/30/2025 | 6/30/2026 | EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 Follows Form \$ BA/GL/POLL/PL/WC |
| 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 <input type="checkbox"/> | Y N/A | WC7413401-00 | 6/30/2025 | 6/30/2026 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> 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 |
| C | 2nd Layer Excess Liability | Y | Y | G48664088 001 | 6/30/2025 | 6/30/2026 | Limit of Liability 5,000,000 |
| A | Pollution Liability | Y | Y | GPL5681905-00 | 6/30/2025 | 6/30/2026 | Per Occurrence 1,000,000 |
| A | Professional Liability | Y | Y | GPL5681905-00 | 6/30/2025 | 6/30/2026 | Each Claim 1,000,000 |

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

Additional Named Insureds -

Superior Environmental Solutions, LLC
SES Labor Corp.
SES-R1 Real Estate, LLC
SES-R1, LLC
Superior Environmental Labor, LLC
Buckeye Acquiror LLC
See Attached...**CERTIFICATE HOLDER****CANCELLATION**

For Information Only

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

Nicholas Koenemann

© 1988-2015 ACORD CORPORATION. All rights reserved.



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

| | | |
|---------------------------------|-----------|---|
| AGENCY RCP, Alera Group, LLC | | NAMED INSURED Superior Environmental Solutions, LLC 9996 Joseph James Dr Cincinnati OH 45246 |
| POLICY NUMBER | | |
| CARRIER | NAIC CODE | EFFECTIVE DATE: |

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

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

Wolverine Ultimate Parent LLC
 Buckeye Intermediate LLC
 dba Midwest Waterblasting Ohio
 dba MWC Ohio
 dba Arrowhead Environmental
 dba Arrowhead Environmental Services
 dba Resource One
 dba Hydro Technology
 dba Mid Valley Industrial Services
 dba Mountain Industrial Services
 dba American Remediation and Environmental
 dba Captain Clean LTD

Additional Coverage -

Unscheduled Equipment
 The Cincinnati Insurance Company NAIC#10677
 Effective: 06/30/2025 - 06/30/2026
 Policy #ENP0720512
 Limit: \$500,000

Equipment Leased or Rented from Others
 The Cincinnati Insurance Company NAIC# 10677
 Effective: 06/30/2025 - 06/30/2026
 Policy #ENP0720512
 Limit: \$1,000,000

Certificate Holder is included as additional insured under General Liability (including Ongoing and Completed Operations), Pollution Liability, Professional Liability, Automobile Liability, and Umbrella Liability on a primary and non-contributory basis, where required by written contract. Waiver of Subrogation applies in favor of the additional insureds under General Liability, Pollution Liability, Professional Liability, Automobile Liability, Umbrella Liability, and Workers Compensation, where required by written contract, except as prohibited by law. Umbrella is follow form over general liability, pollution liability, professional liability, auto liability and workers compensation. Thirty day notice of cancellation, except for cancellation due to non payment of premium, then 10 days shall apply.

Environmental general liability endorsements equivalent to CG 2010 07/04 and CG 2037 07/04 are included.