

MEMORANDUM OF MEETING OR CONVERSATION

IXI TELEPHONE I I PERSONAL TIME: 1:45p.m. DATE: 12/12/94

ORIGINATING PARTY:

Phillip Solano

HRMB

OTHER PARTIES:

Stephanie Witkowski

Rinchem Company, Inc.

SUBJECT:

HAZARDOUS WASTE FACILITY CERTIFICATE OF LIABILITY INSURANCE
(HWFCLI)

DISCUSSION:

I informed Stephanie that I had noted some discrepancies on Rin-
chem's HWFCLI: 1) Document submitted was not identical to the in-
strument 40 CFR 264.151(j). 2) It is questionable whether Rinchem
qualifies under 40 CFR 264.147(b) (both sudden and nonsudden oc-
currences). Awaiting a legal review.

CONCLUSIONS and/or AGREEMENTS:

I will fax to Stephanie a copy of ECS Underwriting, Inc.'s copy
of Rinchem's HWFCLI (faxed on 12/12/94). Stephanie in turn will
correct items 1 and 2 above with ECS.

DISTRIBUTION:

Barbara Hoditschek

Red File '94

SIGNED:

Phillip Solano

Copy Only



November 30, 1994

Ms. Anna Walker
New Mexico Haz. Waste & Radioactive Materials Bureau
525 Camino De Los Marquez, Ste. 4
Santa Fe, NM 87502

ECS
Underwriting,
Inc.

520 Eagleview Boulevard
PO Box 636
Exton, PA 19341-0636
(610) 458-0570
(800) ECS-1414
(outside Pennsylvania)
Fax (610) 458-8667

Re: RINCHEM COMPANY, INC.
POLICY #NTA125969005

Dear Ms. Walker:

Enclosed please find the Hazardous Waste Facility Certificate of Liability Insurance for the above-referenced account as required by New Mexico state law.

If you have any questions, please feel free to give me a call.

Sincerely,

Victoria Ostertag
Victoria Ostertag, ARM
Underwriter
Pollution Liability Department

VO/bb

Enclosure

cc: John Beauchamp

(VIA FAX: 602-991-9451)

Ms. Janette Smith, Anderson-Reeve & Associates, Inc.

HAZARDOUS WASTE FACILITY CERTIFICATE OF LIABILITY INSURANCE

1. Reliance National Indemnity company, (the "Insurer"), of 4 Penn Center Plaza, Philadelphia, PA, 19103, hereby certifies that it has issued liability insurance covering bodily injury and property damage to RINCHEM COMPANY, INC. (the "Insured") of 6133-37 EDITH BOULEVARD, N.E., ALBUQUERQUE, NM 87107 in connection with the Insured's obligation to demonstrate financial responsibility under 40 CFR 264.147 or 265.147. The coverage applies at 6133-37 EDITH BOULEVARD, N.E., ALBUQUERQUE, NM 87107 and Rt. 74, 511 HIGHWAY 213, CHAPARRAL, NM 88201 EPA # NMD002208627 for sudden and nonsudden accidental occurrences. The limits of liability are \$1,000,000 each occurrence and \$2,000,000 annual aggregate, exclusive of legal defense costs. The coverage is provided under policy number NTA125969005 issued on April 30, 1994. The effective date of said policy is April 30, 1994.

2. The Insurer further certifies the following with respect to the insurance described in Paragraph 1:

(a) Bankruptcy or insolvency of the Insured shall not relieve the Insurer of its obligations under the policy.

(b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the Insured for any such payment made by the Insurer. This provision does not apply with respect to that amount of any deductible for which coverage is demonstrated as specified in 40 CFR 264.147(f) or 265.147(f).

(c) Whenever requested by a Regional Administrator of the U.S. Environmental Protection Agency (EPA), the Insurer agrees to furnish to the Regional Administrator a signed duplicate original of the policy and all endorsements.

(d) Cancellation of the insurance, whether by the Insurer, or the Insured, a parent corporation providing insurance coverage for its subsidiary, or by a firm having an insurable interest in and obtaining liability insurance on behalf of the owner or operator of the hazardous waste management facility, will be effective only upon written notice and only after the expiration of ~~sixty~~ (60) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is(are) located.

(e) Any other termination of the insurance will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is(are) located.

I hereby certify that the wording of this instrument is identical to the wording specified in 40 CFR 264.151(j) as such regulation was constituted on the date first above written, and that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more States.



(Signature of Authorized Representative of Insurer)

Paul M. Murdoch, Assistant Vice President
Authorized Representative of Reliance National Indemnity Company

c/o Environmental Compliance Services, Inc.
520 Eagleview Boulevard
P.O. Box 636
Exton, PA 19341-0636