

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/11/2024

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.

	SUBROGATION IS WAIVED, subject nis certificate does not confer rights t				ıch end	lorsement(s)		require an endorsemer	ıt. A st	atement on	
	DUCER				CONTAC NAME:	Maryo Harri					
McGriff, a Marsh & McLennan Agency LLC Company 2000 International Park Drive						PHONE (A/C, No, Ext): 1-800-476-2211 FAX (A/C, No):					
	e 600 ningham, AL 35243				E-MAIL ADDRES	ss: mhamrick@	mcgriff.com				
DIIII	illigilatii, AL 35243					INS	URER(S) AFFOR	DING COVERAGE		NAIC #	
					INSURE	R A :Old Repub	lic Insurance C	ompany		24147	
INSURED Kinder Morgan, Inc. including Southern Natural Gas Company, L.L.C. 1001 Louisiana Street, Suite 1000						INSURER B:					
						INSURER C:					
Hou	ston, TX 77002				INSURE	RD:					
					INSURE	RE:					
					INSURE	RF:					
СО	VERAGES CER	TIFIC	CATE	NUMBER:DDW8UB6J				REVISION NUMBER:			
IN C	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY I XCLUSIONS AND CONDITIONS OF SUCH	QUIF PERT POLI	REME AIN, ⁻ CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF AN'	Y CONTRACT THE POLICIE: EDUCED BY F	OR OTHER IS DESCRIBE PAID CLAIMS.	DOCUMENT WITH RESPE	CT TO	WHICH THIS	
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S		
Α	X COMMERCIAL GENERAL LIABILITY			MWZY 317827 24		09/01/2024	09/01/2025	EACH OCCURRENCE	\$	5,000,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	5,000,000	
								MED EXP (Any one person)	\$		
		Х						PERSONAL & ADV INJURY	\$	5,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	5,000,000	
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	include	
	OTHER:								\$		
Α	AUTOMOBILE LIABILITY			MWTB 317826 24		09/01/2024	09/01/2025	COMBINED SINGLE LIMIT (Ea accident)	\$	1.000.000	
	X ANY AUTO							BODILY INJURY (Per person)	\$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	OWNED SCHEDULED AUTOS ONLY AUTOS	Х						BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$							7.COREO/IIE	\$		
Α	WORKERS COMPENSATION			MWC 317825 24		09/01/2024	09/01/2025	X PER OTH- STATUTE ER	Ψ		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE							STATUTE ER	\$	4,000,00	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYEE		4,000,00	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	4,000,00	
	DESCRIPTION OF OPERALIONS BEIOW							E.L. DISEASE - POLICY LIMIT	\$		
									\$ \$ \$		
RE: Loca writt	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI Non- Exclusive Easement Agreement date ation: 32.116123, -81.147462 through 32.1 en contract. For the General Liability policy by terms, conditions and exclusions. The G	d Jul 13600 , Insu	y 26, 1), -81 irance	2022. Work being performed .147781. Certificate Holder is a is primary and non-contribu	: GPA re s include itory ove	equesting SNO ed as Additiona er any other co	6 to relocate p al Insured (Exc llectable insur	ortion of pipeline onto a GP cluding Workers' Compensa ance if required by written o	ation) if contract	required by subject to	
CERTIFICATE HOLDER						CANCELLATION					
Georgia Ports Authority						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
Attn: Joanna Caldwell 2nd Main Street Garden City, GA 31408					AUTHORIZED REPRESENTATIVE Agham						