Railroad Protective Liability Policy

If providing your own private policy:

1. The **named insured** on the policy must match the **Certificate Holder** listed in the email accompanying this attachment.

2. The policy must carry coverage limits of **$2 million per occurrence** and **$6 million aggregate**.

3. Please submit this policy along with **all other items requested in the email**.
    - *You do not need to complete the form below.*

If securing the policy through the Railroad:

- The cost of the RPL policy is **$1,150 for 60 days**.

Please submit the following:

1. The **completed form** below, filled out in its entirety.

2. **Proof of payment** for the $1,150. (If an Invoice is needed, please email Realestateapplications@gwrr.com with the file ID in the subject line)

MARSH

Railroad Protective Liability Application

Named Insured Railroad: _____

Address: c/o Real Estate Dept, 13901 Sutton Park Dr., S., Ste. 270, Jacksonville, FL 32224

Name of Designated Contractor: _____

Address: _____

Contractors GL Limits: _____

Carrier: _____

Contractors Umbrella Limits: _____

Carrier: _____

Will the Contractor be holding the Railroad Harmless? Yes ☒ No ☐

Will the Railroad be listed as an "Additional Insured" on the Contractor's CGL and Umbrella policies? Yes ☒ No ☐

Will the Contractor's GL & Umbrella policies remove the contractual exclusion for work within 50' of a Railroad? Yes ☒ No ☐

Railroad Protective Limits Required: yes

Per Occurrence: $2 Million Aggregate: $6 Million

Name & Address for Whom Work is Being Performed: _____

Description of Job: _____

Approximate Length of Job (years/months): _____

Total Cost of Job: _____ Cost of Work Within 50' of Tracks: _____

Daily Train Traffic: _____ Freight: _____ Passenger: _____

Will there be any Railroad flagmen/supervisors? Yes ☒ No ☐

Will there be any other work performed by any railroad employees? Yes ☐ No ☐

If yes, please describe: _____

Will there be any Railroad equipment assigned to the contractor? Yes ☐ No ☐

If yes, please describe: _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____