



TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

www.tdlr.texas.gov

ELECTRICAL CONTRACTOR CERTIFICATE OF INSURANCE

This certificate is issued to the Texas Department of Licensing and Regulation as a matter of information only and confers no rights upon the certificate holder. This Certificate of Insurance neither affirmatively or negatively amends, extends or alters the coverage afforded by the policy specified herein.

This certificate is used only to indicate general liability insurance coverage. For information regarding worker's compensation coverage, refer to the license application and/or the application instructions. The terms of the insurance policy control over the terms of the certificate of insurance.

Business Name/dba: _____

Business Phone Number: _____ (Area Code and Phone Number) Email Address: _____

Business Address: _____
Number, Street Name, Suite Number/Apartment Number City State Zip code

Insurance Company: _____

Policy Number: _____ Binders or Declarations are not Accepted Term Dates: _____ Effective (mm/day/year) Expiration (mm/day/year)

Insurance Agency: _____

Name of Agent: _____ Agent Phone Number: _____ (Area Code and Phone Number)

Agency Address: _____
Number, Street Name, Suite Number City State Zip code

An Electrical Contractor, Electrical Sign Contractor, and Residential Appliance Installer Contractor License require general liability coverage of at least:

- \$300,000 per occurrence (combined for property damage and bodily injury);
- \$300,000 aggregate for products and completed operations;
- \$600,000 aggregate (total amount the policy will pay for damage and bodily injury)

I further certify that the licensee's insurance policy meets or exceeds the minimum requirements stated above.

Printed Name of Authorized Insurance Representative

Signature

Date

CERTIFICATE HOLDER ADDRESS:
Texas Department of Licensing and Regulation
P.O. Box 12157
Austin, TX 78711-2871
Phone: (512) 463-6599 • Fax: (512) 475-2871
www.tdlr.texas.gov

CANCELLATION:
Should any of the above described policies be canceled or reduced, the insurance carrier shall endeavor to notify the Department at least 30 days before the cancellation or non-renewal by the insurance carrier, and not more than 10 days after non-renewal or cancellation by the insured.