

6905 A Grapevine Hwy
North Richland Hills, TX 76180



Fax

To: Policy Holders of America

From: JERRY PLOWMAN

Fax: 888-648-8823

Pages: 8

Phone:

Date: 10/14/2002

Re: Vendor Application

CC:

Urgent For Review Please Comment Please Reply Please Recycle

Attention: Melinda Ballard



A Single Source Provider® of
Fire & Water Damage Restoration & Reconstruction

October 14,2002

Policy Holders of America
Melinda Ballard

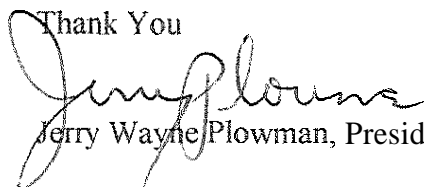
We would be honored to be placed on your Vendor Program for Mold Decontamination Companies. You will find attached the pledge, application, and other documents showing our certification and General Liability Coverage.

We, I believe are one of the few companies who *not* only are properly trained in Mold Decontamination but in properly drying down a home in case of a Water Emergency. The reason for attaching a copy of our General Liability Insurance is to show we are properly covered including "pollutants" (which means we are covered in working with chemicals and mold decontamination), again very few companies have this coverage.

We are looking forward in serving clients referred to our company. We will give them a true and accurate "Scope" on work to be done and cost to do said work.

Our company has spent much time on research into areas of Mold Decontamination. possible medical risk. If you ever need our help please feel free to contact us.

Thank You



Jerry Wayne Plowman, President

6905A Grapevine Hwy. • N. Richland Hills, TX 76180
(817) 590-4485 • (817) 306-9433 • Fax (817) 232-2467
www.purofirstotgc.com • jplowpurofirst@aol.com
Independently Owned and Operated

POA

Policyholders of America 888-648-
8823

IAQ PROFESSIONAL ETHICS PLEDGE

POA is proud to refer its members to Indoor Air Quality professionals (testers, consultants, remediators, and contractors) who pledge to follow ethical guidelines as set forth by POA.

The following is the pledge we ask each and every contractor to sign and send back to us if they want to be placed on our referral list. An additional page to fill out also is attached.

THE PLEDGE TO UPHOLD PROFESSIONAL AND ETHICAL CONDUCT:

As a professional, I pledge to **remain independent and not take an *advocacy role*** for any party involved in a job referred to me by POA.

As a professional, I pledge to **not minimize or overstate the level of contamination** and what is needed to correct it, for any job referred to me by POA.

As a professional, I pledge to **look *for* contamination**, not look for ways of not finding it on any POA-referred job.

As a professional, I pledge to disclose in writing, to a POA-referred homeowner, if any **restrictions have been placed on me by an insurer or other party involved and describe in writing any such restrictions**. (This includes but is not limited to the number of samples taken, areas evaluated for testing and/or remediation, requests involving policy provisions or coverage limits, requests to alter reports).

As a professional, I pledge to **provide the policyholder with a true and correct copy of the report** done on their home by me or my company and do so in a timely manner, if the POA-homeowner requests it.

As a professional, I pledge to **provide a true and correct scope of work to be performed and costs thereof**, regardless of policy limits or other restrictions, if any, for any job referred to me by POA.

As a professional, on POA-referred jobs, I pledge to **adhere to the most stringent published guidelines for assessment and remediation of mycotoxin-producing molds**. (It is understood that these guidelines, which may become mandates and at that time the mandates need only be followed, will change from time to time and it is critical that the companies we refer business to keep up with and practice the highest standards.)

www.policyholdersofamerica.org

REFERRAL QUESTIONNAIRE: This must accompany pledge so that we can better serve requests for information

NAME OF COMPANY: PuroFirst of Greater Tarrant County

GEOGRAPHIC AREA/STATES COVERED: FT. WORTH/DALLAS, TX area

AREA OF EXPERTISE

REMEDIATOR

IAQA INVESTIGATOR (check one or more)

investigator/tester

consultant

field technician

CONTRACTOR (check one)

General Contractor (Build-back)

HVAC

Plumbing

PRIMARY CONTACT: Jerry Plowman

SECONDARY CONTACT: Carol Plowman

PHONE NUMBER: (817) 306-9433 or (817) 590-4485

WEBSITE: PuroFirstOGTC.com

EMAIL ADDRESS OF CONTACTS: JPlowpurofirst@aol.com

COMPANY ADDRESS: 6905 A. Grapevine Hwy
North Richland Hills, TX 76180

NOTE: (If applicable): _____



CERTIFIED FIRM

2002

be it known that:

PUROFIRST OF GREATER TARRANT COUNTY

Is registered with the INSTITUTE OF INSPECTION, CLEANING, AND RESTORATION CERTIFICATION, and has pledged to implement an advanced training program and a course of study leading to the certification of all On-Location Operators actively engaged in providing services to the consumer in cleaning and restoration and has pledged its support in establishing and maintaining a professional attitude in the conduct of its daily business at all times and providing the consumer with the highest degree of professionalism possible.

Lee Zimmerman, President

Valid through 12-31-2002



(800) 835-4624

be it known that:

JERRY PLOWMAN

Is a registrant in good standing with the INSTITUTE OF INSPECTION, CLEANING, AND RESTORATION CERTIFICATION, and has qualified by service and examination for Certification in the following areas:

- WATER DAMAGE RESTORATION**
- FIRE & SMOKE RESTORATION**
- APPLIED STRUCTURAL DRYING**
- APPLIED MICROBIAL REMEDIATION TECHNICIAN**

and has pledged to perform services in these areas with skill, honesty, and integrity in order to provide the consumer with the highest degree of professionalism possible.

46067
REGISTER NUMBER

02/02
EXPIRATION DATE

Client#: 4813

PUROFI1

ACORD. CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YY) 08/09/02
PRODUCER Cadenhead Shreffler Insurance P.O. Box 1119 Bedford, TX 76095 817 589-4500	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURERS AFFORDING COVERAGE		
INSURED Purofirst of Greater Tarrant County 2413 McAdoo Lane Saginaw, TX 76131	INSURER A: Everest Indemnity Insurance Company INSURER B: Hartford Casualty Insurance Co. INSURER C: Texas Builders Insurance Co INSURER D: INSURER E:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS			
A	GENERAL LIABILITY	400000143902	08/07/02	08/07/03	EACH OCCURRENCE \$1,000,000			
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire) \$50,000			
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$5,000			
	<input checked="" type="checkbox"/> Deductible \$5,000				PERSONAL & ADV INJURY \$1,000,000			
GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE \$2,000,000			
<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					PRODUCTS - COM/POP AGG \$2,000,000			
B	AUTOMOBILE LIABILITY	46UECRU3101	06/21/02	06/21/03	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000			
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$			
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$			
	<input checked="" type="checkbox"/> HIRED AUTOS				PROPERTY DAMAGE (Per accident) \$			
<input checked="" type="checkbox"/> NON-OWNED AUTOS	AUTO ONLY - EA ACCIDENT \$							
GARAGE LIABILITY					OTHER THAN EA ACC \$			
<input type="checkbox"/> ANY AUTO					AUTO ONLY: AGG \$			
EXCESS LIABILITY					EACH OCCURRENCE \$			
<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE					AGGREGATE \$			
<input type="checkbox"/> DEDUCTIBLE					\$			
RETENTION \$					\$			
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC6451AUM	10/24/01	10/24/02	WC STATUTORY LIMITS OTH-ER			
	EL EACH ACCIDENT \$1,000,000							
	EL DISEASE - EA EMPLOYEE \$1,000,000							
	EL DISEASE - POLICY LIMIT \$1,000,000							
OTHER					\$2,000,000 Aggregate			
Pollution: Ded. \$10,000					\$1,000,000 Each Pollution condition			

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENTS/SPECIAL PROVISIONS
 Certificate holder is included as additional insured on the General Liability policy

CERTIFICATE HOLDER	ADDITIONAL INSURED:INSURER LETTER:	CANCELLATION
Purofirst International Attn: Jackie Burdo 5350 NW 35th Ave. Ft. Lauderdale, FL 33309		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE