

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/02/2016

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 be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in liqu of such endorsement(s)

	ne terms and conditions of the policy ertificate holder in lieu of such endor			naorsei	nent. A sta	tement on th	is certificate does not co	merr	ights to the	
PRODUCER					CONTACT NAME:					
MARSH RISK & INSURANCE SERVICES					NAME: PHONE FAX (A/C, No, Ext): (A/C, No):					
345 CALIFORNIA STREET, SUITE 1300 CALIFORNIA LICENSE NO. 0437153					(A/C, No, Ext): (A/C, No): E-MAIL ADDRESS:					
	SAN FRANCISCO, CA 94104			ADDRES					NAIC#	
Attn: minerva.tirado@marsh.com / +1415 743 8234 101830377-STND-GAW-16-17				INOUE	INSURER A : Old Republic Insurance Co				24147	
INSURED					INSURER B:				21117	
AGILENT TECHNOLOGIES, INC.					INSURER C:					
GLOBAL RISK MANAGEMENT 5301 STEVENS CREEK BLVD.										
Mail Stop: 1A-IR				INSURE						
SANTA CLARA, CA 95051				INSURER E : INSURER F :						
COVERAGES CERTIFICATE NUMBER:					SEA-002716211-25 REVISION NUMBER: 4					
	HIS IS TO CERTIFY THAT THE POLICIES							E POL	ICY PERIOD	
١N	IDICATED. NOTWITHSTANDING ANY R	EQUIREM	ENT, TERM OR CONDITION	OF ANY	CONTRACT	OR OTHER I	DOCUMENT WITH RESPEC	T TO	WHICH THIS	
	ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH						HEREIN IS SUBJECT TO	ALL	THE TERMS,	
INSR	TVDF 05 W0VD 4V05	ADDL SUE	BR	POLICY EFF POLICY EXP (MM/DD/YYYY) LIMITS						
LTR A	X COMMERCIAL GENERAL LIABILITY	INSD WV	D POLICY NUMBER MWZY308354		(MM/DD/YYYY) 11/01/2016	11/01/2017			5.000.000	
					11/01/2010	11/01/2017	DAMAGE TO RENTED	\$	-,,	
	CLAIMS-MADE A OCCUR							\$	5,000,000 5,000	
							, , , ,	\$	5,000,000	
								\$		
	GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO- JECT LOC							\$	5,000,000	
								\$ \$	5,000,000	
Α	OTHER: AUTOMOBILE LIABILITY		MWTB308353		11/01/2016	11/01/2017		\$	E 000 000	
^	V		WW 1 D300333		11/01/2010	11/01/2017	(Ea accident)	\$ \$	5,000,000	
	^ ANY AUTO SCHEDULED						` ' '	\$ \$		
	AUTOS AUTOS NON-OWNED						` ' '	\$ \$		
	HIRED AUTOS AUTOS						(Per accident)			
	LIMPRELLATION							\$		
	UMBRELLA LIAB OCCUR							\$		
	EXCESS LIAB CLAIMS-MADE	-						\$		
Α	DED RETENTION \$ WORKERS COMPENSATION		MWC30835200 (CA)		11/01/2016	11/01/2017		\$		
A	AND EMPLOYERS' LIABILITY		MWC30835500 (AOS)		11/01/2016	11/01/2017	X PER OTH- STATUTE ER		F 000 000	
٨	ANY PROPRIETOR/PARTNER/EXECUTIVE N	N/A	WWC30633300 (ACS)		11/01/2010	11/01/2017	E.L. EACH ACCIDENT	\$	5,000,000	
	(Mandatory in NH) If yes, describe under	1					E.L. DISEASE - EA EMPLOYEE	\$	5,000,000	
	DÉSCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	5,000,000	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACO	RD 101, Additional Remarks Schedu	ule, may be	e attached if moi	re space is requir	ed)			
EVID	DENCE OF INSURANCE									
OFFITIEIOATE HOLDER					CANCELLATION					
CERTIFICATE HOLDER					CANCELLATION					
INMETCO					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE					
ONE INMETCO DRIVE					THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN					
ELLWOOD CITY, PA 16117					ACCORDANCE WITH THE POLICY PROVISIONS.					
					AUTHORIZED REPRESENTATIVE					
				of Marsh Risk & Insurance Services						
				Minerva	a Tirado		muneroa Jirado			