



# Illinois Environmental Protection Agency

2520 West Iles Avenue • P.O. Box 19276 • Springfield • Illinois • 62794-9276 • (217) 782-3397

## Drycleaner Environmental Response Trust Fund Declarations

Policy Number: \_\_\_\_\_

Named Insured: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Period of Coverage: \_\_\_\_\_ Retroactive Date: \_\_\_\_\_

Insurer: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Names of Additional Insureds

The limits of liability are: \_\_\_\_\_

Deductible per "release": \_\_\_\_\_

Premium: \_\_\_\_\_

This certifies that the policy provides pollution liability coverage for the following "drycleaning facility":

Facility Name	Facility Address	City	State

for "remedial action" costs caused by the "release" of "drycleaning solvent," in accordance with and subject to the limits of liability, exclusions, conditions and other terms of the policy, and endorsements, arising out of operating the "drycleaning facility" identified above.

\_\_\_\_\_  
Signature of the Authorized Representative of the  
Drycleaner Environmental Response Trust Fund of Illinois

***This endorsement changes the policy. Please read it carefully.***

## Additional Insured Lessors of Premises

This endorsement modifies insurance provided under the following:

**Illinois Drycleaner Environmental Response Trust Fund  
Financial Responsibility Program**

### Schedule

Designation of Premises  
(Property Leased to You): \_\_\_\_\_

Name of Person or Organization  
(Additional Insured-Lessor): \_\_\_\_\_

Additional Premium: \_\_\_\_\_

(If no additional premium appears above, then the premium shown on the Declarations suffices to make this endorsement effective.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule, but only with respect to pollution liability covered by this policy arising out of the ownership, maintenance, or use of that part of the premises leased to you and shown in the Schedule and subject to the following additional exclusions:

This insurance does not apply to:

1. Any discovery of contamination after you cease to be a tenant in that premises. Any claim filed after the expiration of the policy or after an extended reporting period.
2. A release caused by structural alterations, new construction, or demolition operations performed by or on behalf of the person or organization shown in the Schedule. A release caused or contributed to by an act or omission of the person or organization shown in the Schedule.