

**PERMIT TO USE TYLER COUNTY ROAD RIGHTS-OF-WAY
FOR REPAIR OF GAS PIPELINE**

TENNESSEE GAS PIPELINE COMPANY, L.L.C., an indirect, wholly owned subsidiary of Kinder Morgan, Inc., whose principle address is 1001 Louisiana Street, Houston, TX 77002, hereinafter referred to as **TGP**, does hereby apply for a permit to utilize the rights of way of **Tyler County Road No. 2510 (Neighbor Road)** as hereinafter provided.

I.

TGP is an interstate transporter of natural gas across Tyler County, Texas.

II.

TGP will replace an existing pipeline, 24 inches in diameter, located in the E.F. Hanks Survey, A-20, Tyler County, Texas. Said pipeline replacement will cross CR 2510 approximately 650 feet northeast of US Hwy 287.

III.

TGP will repair the transmission line in a good and workmanlike manner, in compliance with the highest standards of pipeline construction and in accordance with all applicable laws and regulations.

IV.

TGP will replace pipeline across county rights of way CR 2510 and as nearly as practicable across to a depth so as not to interfere with the continued maintenance of CR 2510, which depth is a minimum to be six (6) feet below the county road surface. **TGP** will restore the surface to the same condition, or better as it was prior to **TGP's** replacement of the pipeline.

V.

TGP understands and agrees that its use of the rights of way of CR 2510 shall be limited exclusively to the purpose designated herein.

VI.

TGP and its successors and designees hereby indemnify and agree to hold **Tyler County**, its officials and affiliated agencies harmless from any and all claims of personal injury (including death), damage to equipment, supplies or personal property or any other claims which may arise by virtue of **TGP's** use of the rights of way for the construction, operation and maintenance of the pipeline by **TGP**. **TGP** shall provide **Tyler County** with a certificate of liability insurance in the amount of \$1,000,000.00 showing **Tyler County** as a named insured under the policy at least seven (7) days before construction begins, and such policy is to remain in force while said pipeline is in use.

VII.

Tyler County makes no warranty of title or representation of right of use. Any suit filed by any adjacent landowner shall be defended by TGP, and Tyler County shall not be liable or responsible for defending any suit or title to such easement or right of way.

VIII.

TGP shall provide and post gas line marking and/or signs on CR 2510 and will maintain the upkeep of such signs.

IX.

TGP is required to pay a \$1,000.00 Administration fee to Tyler County Commissioners' Precinct where line will be located. Payment is due prior to time of approval by Tyler County Commissioners Court. Payment may be made payable by check, cashier check or money order.

By execution hereof in the spaces provided below, TGP does hereby apply for a permit as hereinafter provided, and Tyler County does hereby grant a permit to replace a pipeline under the premises and under the conditions as hereinabove provided to be effective as of the date of the signature on behalf of Tyler County.

Dated this 17 day of May, 2016.

Tennessee Gas Pipeline Company, L.L.C.

By: Gary Griffin

Title: ROW Agent

PERMIT GRANTED ON BEHALF OF TYLER COUNTY, TEXAS

By: HONORABLE TYLER COUNTY JUDGE

By: _____

(Printed name)

Date: _____



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/17/2016

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 have ADDITIONAL INSURED provisions or 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 lieu of such endorsement(s).

PRODUCER John L. Wortham & Son, L.P. PO Box 1388 Houston, TX 77251-1388 www.worthaminsurance.com	CONTACT NAME: John L. Wortham & Son, L.P.	
	PHONE (A/C No, Ext): 713-526-3366	FAX (A/C No): 713-521-1951
E-MAIL ADDRESS:		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:		
INSURER B: Loyds Syndicate 2003 SJC/ 4711 ASP		
INSURER C: Ironshore Europe Ltd		
INSURER D: International Insurance Company of Hannover SE		
INSURER E:		
INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** 29940110 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ANGL	SUBR	INSR	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					NOT APPLICABLE			EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY								COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	UMBRELLA LIAB <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> CLAIMS-MADE					ME1501958 ME1502283 ME1502911	8/1/2015 8/1/2015 8/1/2015	8/1/2016 8/1/2016 8/1/2016	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N			N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The General Liability is self insured.

CERTIFICATE HOLDER **CANCELLATION**

Tyler County Commissioners Court Attention: James T. Hughes, Precinct 2 Commission 205 N. Charlton Woodville TX 75797	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE John L. Wortham & Son, L.P.
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ADDITIONAL REMARKS SCHEDULE

AGENCY John L. Wortham & Son, L.P.		NAMED INSURED Kinder Morgan, Inc. 1001 Louisiana Street Houston TX 77002	
POLICY NUMBER		EFFECTIVE DATE:	
GARNER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: Certificate of Liability (03/16)

HOLDER: Tyler County Commissioners Court Attention: James T. Hughes, Precinct 2 Commission
ADDRESS: 205 N. Charlton Woodville TX 75979

THE EXCESS LIABILITY POLICY INCLUDES A BLANKET AUTOMATIC ADDITIONAL INSURED ENDORSEMENT THAT CONFERS ADDITIONAL INSURED STATUS TO THE CERTIFICATE HOLDER ONLY IF THERE IS A WRITTEN CONTRACT BETWEEN THE NAMED INSURED AND THE CERTIFICATE HOLDER THAT REQUIRES THE NAMED INSURED TO NAME THE CERTIFICATE HOLDER AS AN ADDITIONAL INSURED.

ADDITIONAL INSURED IN FAVOR OF TYLER COUNTY WHERE AND TO THE EXTENT REQUIRED BY WRITTEN CONTRACT.

ALL POLICIES INCLUDE A BLANKET NOTICE OF CANCELLATION TO CERTIFICATE HOLDERS ENDORSEMENT, PROVIDING FOR 30 DAYS' ADVANCE NOTICE IF THE POLICY IS CANCELLED BY THE COMPANY OTHER THAN FOR NONPAYMENT OF PREMIUM, 10 DAYS' NOTICE IF THE POLICY IS CANCELLED FOR NONPAYMENT OF PREMIUM. NOTICE IS SENT TO CERTIFICATE HOLDERS WITH MAILING ADDRESSES ON FILE WITH THE AGENT OR THE COMPANY. THE ENDORSEMENT DOES NOT PROVIDE FOR NOTICE OF CANCELLATION IF THE NAMED INSURED REQUESTS CANCELLATION.