

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
3/26/2009

PRODUCER (413) 733-3131  
FieldEddy Insurance  
96 Shaker Road  
P.O. Box 709  
East Longmeadow, MA 01028-0709

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 Spectrum Analytical, Inc.  
830 Silver Street  
Agawam, MA 01001

INSURER A: Zurich American Ins Co.  
INSURER B: Steadfast Insurance Company  
INSURER C:  
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<br><input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  | GLO7968952-15 | 12/31/2008                       | 12/31/2009                        | EACH OCCURRENCE \$ 1,000,000   |
|          |  |               |                                  |                                   | FIRE DAMAGE (Any one fire) \$ 100,000  |
|          |  |               |                                  |                                   | MED EXP (Any one person) \$ 5,000  |
|          |  |               |                                  |                                   | PERSONAL & ADV INJURY \$ 1,000,000   |
|          |  |               |                                  |                                   | GENERAL AGGREGATE \$ 2,000,000   |
|          |  |               |                                  |                                   | PRODUCTS - COMP/OP AGG \$ 2,000,000  |
|          | GEN'L AGGREGATE LIMIT APPLIES PER:<br><input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC  |               |                                  |                                   |  |
| A        | AUTOMOBILE LIABILITY<br><input checked="" type="checkbox"/> ANY AUTO<br><input checked="" type="checkbox"/> ALL OWNED AUTOS<br><input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> HIRED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS | BAP9022011-05 | 12/31/2008                       | 12/31/2009                        | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000   |
|          |  |               |                                  |                                   | BODILY INJURY (Per person) \$  |
|          |  |               |                                  |                                   | BODILY INJURY (Per accident) \$  |
|          |  |               |                                  |                                   | PROPERTY DAMAGE (Per accident) \$  |
|          | GARAGE LIABILITY<br><input type="checkbox"/> ANY AUTO  |               |                                  |                                   | AUTO ONLY - EA ACCIDENT \$<br>OTHER THAN AUTO ONLY: EA ACC \$<br>AGG \$                  |
| B        | EXCESS LIABILITY<br><input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE<br><input type="checkbox"/> DEDUCTIBLE<br><input checked="" type="checkbox"/> RETENTION \$ 10,000   | SEO9279268-07 | 12/31/2008                       | 12/31/2009                        | EACH OCCURRENCE \$ 5,000,000   |
|          |  |               |                                  |                                   | AGGREGATE \$ 5,000,000   |
|          |  |               |                                  |                                   | \$   |
|          |  |               |                                  |                                   | \$   |
|          |  |               |                                  |                                   | \$   |
| A        | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  | WC5893900-04  | 3/28/2009                        | 3/28/2010                         | <input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER |
|          |  |               |                                  |                                   | E.L. EACH ACCIDENT \$ 1,000,000  |
|          |  |               |                                  |                                   | E.L. DISEASE - EA EMPLOYEE \$ 1,000,000  |
|          |  |               |                                  |                                   | E.L. DISEASE - POLICY LIMIT \$ 1,000,000   |
| B        | OTHER<br>E&O, Professional & Pollution   | PEC7968951-14 | 12/31/2008                       | 12/31/2009                        | occurr./aggreg. 1000000/5000000  |

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
Proof of insurance coverage issued per request.

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER: \_\_\_\_\_

CANCELLATION

"For Insurance Verification Purposes"

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 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



**IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

**DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.