Important Notice - Please Read this Description of Coverage Carefully

As a handy reference guide, please read this document and keep it in a safe place with your other insurance documents. This summary of coverage is not a contract of insurance but is a summary of the principal provisions of the insurance while in effect. Complete policy provisions are contained in the Master Policy 9908-35-44 on file with the administrator. You may cancel the insurance described in this summary at any time. Mail this summary of coverage with your written request for cancellation to the Policy Administrator noted at the end of this summary.

POLICY INFORMATION

POLICYHOLDER: NWAA Association

GROUP POLICY NO.: 9908-35-44

Insured Persons - All Contractor Company Members or Supplier Company Members of the Policyholder primarily engaged in the business of groundwater-related construction or service and/or pump installation or service.

<table>
<thead>
<tr>
<th>Hazard</th>
<th>Principal Sum</th>
</tr>
</thead>
<tbody>
<tr>
<td>24 Hour Business and Pleasure</td>
<td>$50,000</td>
</tr>
</tbody>
</table>

EFFECTIVE DATE OF INSURANCE – Insurance becomes effective on the latest of: 1) the date on which a person first meets the eligibility criteria as an Insured Person, or 2) the beginning of the period for which required premium is paid for such Insured Person.

DATE INSURANCE ENDS - Insurance will end at the earliest of: 1) the date this policy ends; 2) the expiration of the period for which required premium has been paid for such Insured Person; 3) the date on which a person ceases to meet the eligibility criteria as an Insured Person; or 4) the date on which We pay out 100% of the Principal Sum.

BENEFITS

We will pay the applicable Benefit Amount if an Accident results in a covered Loss not otherwise excluded. The Accident must result from an insured Hazard and occur while the Insured Person is insured under this policy, while it is in force. The covered Loss must occur within one year after the Accident. Insured Persons are covered 24 hours a day, 365 days a year, while on business or pleasure.

Accidental Death and Dismemberment Benefits:
100% of the Benefit Amount is payable for Accidental: loss of life; loss of speech and loss of hearing; loss of speech and one of: loss of hand, foot or sight of one eye; loss of hearing and one of: loss of hand, foot or sight of one eye; loss of both hands, both feet, loss of sight or any combination thereof; 50% of the Benefit Amount is payable for Accidental: loss of hand, foot or sight of one eye (any one of each); loss of speech or loss of hearing; and 25% of the Benefit Amount is payable for Accidental loss of thumb and index finger of the same hand. If an Insured Person suffers multiple Losses as the result of one Accident, then We will only pay the single largest Benefit Amount applicable to all such Losses. Loss must occur within one (1) year after the Accident.

Extensions of Insurance:
Disappearance: If an Insured Person has not been found within one (1) year of the disappearance, stranding, sinking, or wrecking of any Conveyance in which an Insured Person was an occupant at the time of the Accident, then it will be assumed, subject to all other terms and conditions of this policy, that an Insured Person has suffered Loss of Life insured under this policy. Exposure if an Accident resulting from an insured Hazard causes an Insured Person to be unavoidably exposed to the elements and as a result of such exposure an Insured Person has a Loss, then such Loss will be insured under this policy.

Reduction of Benefit Amount:
If an Insured Person is age 70 or older on the date of an Accident causing Loss, then the Benefit Amount payable will be reduced according to the following schedule:

<table>
<thead>
<tr>
<th>Age on Date of Accident</th>
<th>Amount of Benefit Amount after Reduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>70-74</td>
<td>65%</td>
</tr>
<tr>
<td>75-79</td>
<td>45%</td>
</tr>
<tr>
<td>80-84</td>
<td>30%</td>
</tr>
<tr>
<td>85 and Over</td>
<td>25%</td>
</tr>
</tbody>
</table>

EXCLUSIONS

Insurance does not apply to any Accident, Accidental Bodily Injury or Loss when the United States of America has imposed any trade sanctions prohibiting the making of any payment against persons, or any other legal prohibition against the insurance. In addition, We will not be liable for:

a) Insured Person riding as a passenger in, entering, or exiting any aircraft while acting or training as a pilot or crew member (This exclusion does not apply to passengers who temporarily perform pilot or crew functions in a life threatening emergency); 2) emotional trauma, mental or physical illness, disease, normal pregnancy, normal childbirth or elective abortion, bacterial or viral infection, bodily malfunctions or medical or surgical treatment thereof, except infections which result from Accidental Bodily Injuries. This exclusion does not apply to Your bacterial infection caused by an Accident or by Accidental consumption of a substance contaminated by bacteria; 3) an Insured Person’s commission or attempted commission of any illegal act including but not limited to any felony; 4) Loss caused by or resulting from any occurrence while an Insured Person is incarcerated after conviction; 5) the Insured Person participating in parachute jumping from an aircraft; 6) an Insured Person participating in military action while in active military service with the armed forces of any country or any established international authority. However, this exclusion does not apply to the first sixty (60) consecutive days of active military service with the armed forces of any country or established international authority; 7) an Insured Person traveling or flying on any aircraft engaged in Specialized Aviation Activities; 8) an Insured Person’s suicide, attempted suicide or intentionally self-inflicted injury; 9) a declared or undeclared War.

DEFINITIONS

Accident or Accidental means a sudden, unforeseen, and unexpected event which: 1) happens by chance; 2) is independent of illness, disease or other bodily malformation or medical or surgical treatment thereof; 3) occurs while the Insured Person is insured under the policy which is in force; and 4) is the direct cause of loss.

Accidental Bodily Injury means bodily injury, which is: 1) Accidental; 2) the direct cause of a loss; and 3) occurs while an Insured Person is insured under this policy, which is in force. Accidental Bodily Injury does not include conditions caused by repetitive motion injuries, or cumulative trauma not a result of an Accident, including, but not limited to: 1) Osgood-Schlatter’s Disease; 2) bursitis; 3) Chondromalacia; 4) shin splints; 5) stress fractures; 6) tendinitis; and 7) Carpal Tunnel Syndrome. Benefit Amount means the amount stated in the Schedule of Benefits of the policy which applies: 1) at the time of an Accident; 2) to an Insured Person; and 3) to an applicable Hazard. Company means FEDERAL INSURANCE COMPANY. Conveyance means any motorized craft, vehicle or mode of transportation licensed or registered by a governmental authority with competent jurisdiction. Domestic Partner means a person designated in writing at enrollment by You who: 1) is at least 18 years of age and competent to enter into a contract; 2) is not related to You by blood; 3) has exclusively lived with You for at least twelve (12) months prior to the date of enrollment; 4) is not legally married or separated; and 5) as of the date of enrollment, has with the Primary Insured Person at least two (2) of the following financial arrangements: a) a joint mortgage or lease; b) a joint bank account; c) joint title to or ownership of a motor vehicle or status as a joint lessee on a motor vehicle lease; or d) a joint credit card account with a financial institution. Neither You nor the Domestic Partner can be married to, nor be in a civil union.

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with any one else. Moreover, the Georgia Commissioner of Insurance has recognized that insurance for Domestic Partners is allowable as set forth in Life and Health Directive 95-LAH-3 (December 19, 1995), as amended. Hazard means the circumstances for which this insurance is provided as stated in Section I of the Schedule of Benefits and described in the Hazard section of this policy. Immediate Family Member means Your: 1) Spouse or Domestic Partner; 2) children including adopted children or stepchildren; 3) legal guardians or wards; 4) siblings or siblings-in-law; 5) parents or parents-in-law; 6) grandparents or grandchildren; 7) aunts or uncles; 8) nieces and nephews. Immediate Family Member also means a Spouse’s or Domestic Partner’s children, including adopted children or stepchildren; legal guardians or wards; siblings or siblings-in-law; parents or parents-in-law; grandparents or grandchildren; aunts or uncles; nieces or nephews. Loss is the permanent, irrecoverable and total loss of the capability of speech without the aid of mechanical devices, as determined by a Physician. Loss of Life means death, including clinical death, as determined by the local governing medical authority where such death occurs within 365 days after an Accident. Loss of Sight means complete loss of vision. Remaining vision in that eye must be no better than 20/200 using a corrective aid or device, as determined by a Physician. Loss of Sight of One Eye means permanent loss of vision of one eye. Remaining vision in that eye must be no better than 20/200 using a corrective aid or device, as determined by a Physician. Loss of Speech means the permanent, irrecoverable and total loss of the capability of speech without the aid of mechanical devices, as determined by a Physician. Loss of Thumb and Index Finger means complete severance, through the metacarpal phalangeal joints, of the thumb and index finger of the same hand, as determined by a Physician. We will consider such severance a Loss of Thumb and Index Finger even if the thumb, index finger or both are reattached. If the reattachment fails and amputation becomes necessary, then We will pay an additional Benefit Amount for such amputation.

The Policy Administrator is Independent Marketing, Administration & Insurance Brokerage Corporation of Massachusetts, dba IMAC. This information is a brief description of the important features of this insurance plan. It is not an insurance contract. Insurance benefits are underwritten by Crawford & Company. To File a Claim. To obtain a claim form contact the Claim Administrator, Broadspire, a Crawford Company. Complete all items on the required claim form, attach all appropriate documents, and mail or fax to: Broadspire, P.O. Box 450804, Sunrise, FL 33345, PHONE NUMBER 855-276-2410 Fax Number 855-630-3728

Policy Administrator
The Policy Administrator is International Marketing, Administration & Insurance Brokerage Corporation of Massachusetts, dba IMAC. PHONE NUMBER 781-963-2269.

CHUBB

This information is a brief description of the important features of this insurance plan. It is not an insurance contract. Insurance benefits are underwritten by Federal Insurance Company. Coverage may not be available in all states or certain terms may be different where required by state law. Chubb NA is the U.S.-based operating division of the Chubb Group of Companies, headed by Chubb Ltd. (NYSE:CB) Insurance products and services are provided by Chubb Insurance underwriting companies and not by the parent company itself.