

ENERGY STORAGE SYSTEM WARRANTY INSURANCE - SOLVENCY COVER

This Policy is effected between

1. [Company], hereinafter the **Insured**.

and

2. HDFC ERGO General Insurance, hereinafter the **Insurer**.

Preamble

[Company] (“[Company (short form)]”) is a [Country of Company] based manufacturer of electrical energy storage systems (“ES Systems”) which are sold to commercial customers.

[Company] provides its customers with a warranty against defects in materials and workmanship and a long-term performance warranty that guarantees the ES Systems satisfy a certain performance level (“Extended Warranty”).

[Company] wishes to insure part of its contractual liabilities arising out of the Extended Warranty for the ES Systems sold (“Insured Projects”).

This Policy is issued in conjunction with the Energy Storage System Warranty Insurance Corporate Cover and shall, for certain eligible customers (“Buyers”) of single projects only, replace the Energy Storage System Warranty Insurance Corporate Cover in case of [Company]’s Insolvency.

This Policy shall only cover ES Systems used in Qualified Projects. And hence, Buyers of Qualified Projects will be considered eligible customers for the purpose of this policy.

Therefore, with this Policy, [Company] is providing financial protection to Buyers as beneficiaries. The financial protection is limited by the conditions of this Policy.

I. DEFINITIONS

The capitalized terms used in the Policy shall have the meanings as defined in the following Definitions or at any other place within the Policy or endorsed thereto, including the Schedule and the Exhibits.

A definition to the singular shall include the plural and vice versa.

“Application” means the submitted documents by the Insured in connection with the underwriting of this Policy (including for example questionnaires).

“Applicable Test” means the evaluation of the ES System during both Commissioning and Normal Application, following the test methodology specified in Exhibit C, to confirm adherence to the technical specifications and performance criteria pertinent to the Extended Warranty. All relevant measurement uncertainties and statistical errors must be duly taken into account.

“Buyers” means the buyers of the ES Systems for the Insured Projects.

“Co-Payment” means the percentage of each and every Annual Loss exceeding the Deductible specified in the Schedule for which the Insured is responsible. The Co-Payment for the Energy Storage System Warranty Insurance Solvency Cover is Nil.

“Commercial Operation Date” means the specific, documented point in time when the ES System is verified as fully installed and compliant with all specifications and Extended Warranty conditions, has successfully passed all required tests—including Applicable Test criteria—and is deemed safe and capable of continuously delivering the contracted energy for regular commercial Normal Application.

“Deductible” means the amount of each claim which is payable by the Insured as specified in the Schedule.

All deductibles apply:

- a. Per ES System as stated in the Schedule; or
- b. Per Insured Project, which shall be the sum of all deductibles for all included ES Systems in an Insured Project.

“Energy Storage System (ES System)” means any combination of components listed in the Assembly List, sold by the Insured.

“Excessive Material Aging” means any disproportionate irreversible deterioration in the material properties of the ES System as a result of the passage of time, that causes a reduction in the Insured System Performance.

“Extended Warranty” means the agreement(s) as attached hereto as Exhibit C.

“Faulty Manufacturing” means any defect, including but not limited to a defect in the assembly or construction of an ES System, which was not detected by the Insured’s quality management and control system (including final functional acceptance tests) as it was inspected, approved and/or prescribed by the Insurer upon the necessary underwriting due diligence. Faulty Manufacturing shall not include faulty connection and/or installation of an Insured Product on site performed by the Insured or a third party.

“Indemnity Period” means The Indemnity Period for each ES System shall start on the de facto Commercial Operation Date (“CoD”) of the ES System and continue for the lesser of the duration of the Extended Warranty granted by the Insured to its customer(s), or [tbd] years after the de facto Commercial Operation Date of the ES System, or [tbd] years after the Expiration Date of the Policy Period for the Extended Warranty.

“Independent Expert” is a nationally recognized testing institute the Parties shall mutually agree upon.

“Insolvency” shall have the meaning as set out in section II. C of this Policy.

“Insured Projects” means Qualified Projects, as defined within the Corporate Cover Policy and notified under Section IV C of this Policy. A Qualified Project may only be declared as such if the Project Limit thereof is the same amount or less than: the Policy Limit less the sum of all Project Limits of all Qualified Projects already declared under this policy.

In case Insolvency proceedings are initiated by or against the Insured, sales contracts that have been concluded after the date of filing cannot be declared as an Insured Project.

“Insured Tasks” means tasks performed on Assemblies in the Assembly List as set forth in Exhibit E, which are necessary for the Insured Product to fulfil the Extended Warranty.

“Insured Task Costs” means:

- a. under the Product Warranty, the payout is limited to the costs set forth in the Assembly List for each affected Assembly.
- b. under the Performance Warranty, the maximum payout is [CCY] [tbd] per kWh of Net Added Capacity. Net Added Capacity is defined as [Warranted Capacity] less [Actual Capacity].

“Insured Warranties (Insured System Performance)” means Product Warranty and Performance Warranty expressed in years and also mentioned in the policy schedule. The Insured System Performance shall be set forth in the Extended Warranty.

“Loss” means the calculation according to II. B.

“Material Defect” means any faulty material forming part of an ES System which is not detected by the Insured’s quality management and control system (including final functional acceptance tests) as it was inspected, approved or prescribed by the Insurer during the necessary underwriting due diligence.

“Normal Application” means the use of the ES System in continuous compliance with the Extended Warranty, technical specifications, installation, operation, maintenance, and product manuals supplied by the Insured or their subcontractors, and as further specified in Exhibit C and E and H of this Policy.

“Policy” means this Energy Storage System Warranty Insurance - Solvency Cover for the ES Systems including Exhibits and subsequent endorsements.

“Proven Aggregated Cost” means the sum of all costs which

- Have been incurred for each Insured Project during the Indemnity Period and
- Are reflected in the Assembly List (Exhibit E) and
- Are necessary to restore the warranted quality or performance due to either Faulty Manufacturing, or Material Defect or Excessive Material Aging, and
- Performed under the Extended Warranty insured by this Policy.

For the purposes of this Policy, any Insured Tasks performed on ES Systems that are part of an Insured Project, but for which the Indemnity Period for the Insured Project had not yet begun because the last ES System of the Insured Project had not been commissioned, those Insured Tasks shall be treated for the purposes of this Policy as if they were performed in the first year of the Indemnity Period. However, no Insured Tasks performed on an ES System which is part of an Insured Project shall be considered under this Policy, if such Insured Tasks are performed later than [tba] years after the end of the Policy Period.

“Terrorism” means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organization(s) or government(s), committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear.

“Total Sum Insured (TSI)” means (Per ES System) Sales price agreed between the Insured and the Buyer of the ES System.

II. COVERAGE

A. INSURING AGREEMENT

In the event that, during the Indemnity Period for an Insured Project, the Insured is contractually liable to perform under the Extended Warranty, the Insurer will, subject to the terms, conditions, exclusions, limitations, deductions, and extensions contained in the Policy or endorsed thereon, indemnify the Beneficiary for its Loss, but only to the extent such liability under the Extended Warranty is directly caused by Faulty Manufacturing, Material Defect, or Excessive Material Aging (an “Insured Event”), and only if the Insured has failed to comply with its contractual obligations under the Extended Warranty directly due to the Insolvency of the Insured.

The Insured shall not be deemed to be Insolvent for the purposes of this Policy if at any time, including during or after any Insolvency, the remedy obligations in the Extended Warranty shall be valid and enforceable by the Beneficiary.

B. INDEMNIFICATION

The indemnification shall be on an Insured Project Basis.

The Insurer shall indemnify the Beneficiary for its Loss which shall be defined and calculated as:

The Annual Loss less the Co-Payment for the Insured

1. Annual Loss

The Annual Loss per Insured Project shall be

- a) The Proven Aggregated Cost to be determined at the end of each year after the Commercial Operation Date less
- b) the Deductible less
- c) the sum of Annual Losses in previous years.

If the Proven Aggregated Cost minus the Deductible is a negative number, there shall be no indemnification for that year of the Commercial Operation.

2. Conditions for Proven Aggregated Costs

In the event of a claimed Loss, if appointed by the Insurer, the Proven Aggregated Costs (as defined in the definition section of this Policy) will be determined as set forth in the Independent Expert's Report. If the Independent Expert determines that there are multiple scenarios for Insured Tasks to satisfy the Insured System Performance, the Beneficiary shall only be obligated to indemnify the Insured for the scenario which is the least expensive option.

3. Cap and Task Costs Flexibility

For each Insured Event, the amount indemnifiable by the Insurer to the Beneficiary shall be up to, but no greater than the total sum of the Insured Task Costs of all Insured Tasks which are performed in accordance with the preceding paragraph (hereinafter the "Cap"). However, the Beneficiary is not restricted to the Insured Task Costs for each individual Insured Task. Accordingly, if the Beneficiary is able to save money on the actual costs for an Insured Task, the Beneficiary can utilize such savings for other Insured Tasks that actually cost more than the Insured Task Costs for this Insured Task, provided that the total amount does not exceed the Cap, and all necessary Insured Tasks are actually performed.

4. Limit per Insured Project

The sum of all Annual Losses less Co-Payment per Insured Project is limited to the Limit per Insured Project.

C. INSOLVENCY

The term Insolvency as used in this Policy means the Insured

1. has been granted legal protection through their being found to be bankrupt (other than pursuant to a consolidation, amalgamation or merger); or
2. admits in writing in a judicial, regulatory or administrative proceeding or filing (i) to being insolvent, (ii) unable to pay its debts, (iii) or its inability generally to pay its debts as they become due; or
3. has made a general assignment, arrangement or composition with or for the benefit of all of its creditors; or
4. institutes or has instituted against it a proceeding seeking a judgment of insolvency or bankruptcy or any other relief under any bankruptcy or insolvency law or other similar law affecting creditors' rights, or a petition is presented for its winding up or liquidation, and, in the case of any such proceeding or petition instituted or presented against it, such proceeding or petition (i) results in a judgment of insolvency or bankruptcy or the entry of an order for relief or the making of an order for its winding up or liquidation or (ii) is not dismissed, discharged, stayed or restrained in each case within thirty calendar days of the institution or presentation thereof; or
5. has a resolution passed for its winding up, official management or liquidation (other than pursuant to a consolidation, amalgamation or merger); or

6. seeks or becomes subject to the appointment of an administrator, provisional liquidator, conservator, receiver, trustee, custodian or other similar official for it or for all or substantially all its assets; or
7. has a secured party take possession of all or substantially all its assets or has a distress, execution, attachment, sequestration or other legal process levied, enforced or sued on or against all or substantially all its assets and such secured party maintains possession, or any such process is not dismissed, discharged, stayed or restrained, in each case within thirty calendar days thereafter; or
8. causes or is subject to any event with respect to which, under the applicable laws of any jurisdiction, has an analogous effect to any of the events specified in paragraphs 1. to 7. above (inclusive).

D. ENERGY STORAGE SYSTEMS CORPORATE COVER POLICY

1. The Insured has entered into a Corporate Cover attached hereto as Exhibit A under which the Insured shall receive indemnification for Losses pursuant to the terms and conditions of the Corporate Cover.
2. In the event a claim is made under the Corporate Cover against the Insurer, the Insurer shall have no liabilities or obligations to the Beneficiary under this Policy for that Loss that is claimed by the Insured under the Corporate Cover.
3. Any Loss payments made by the Insurer under this Policy shall erode the Limit per Insured Project of the Corporate Cover and the Limit per Insured Project of this Policy.

E. CONDITION PRECEDENT

1. It shall be a condition precedent to indemnification under this Policy that the Minimum Non-Refundable Policy Premium (stated in the Corporate Cover Policy) has been received in full by the Insurer.
2. It shall be a condition precedent to indemnification under this Policy that the warranted performance level of the ES Systems is agreed by the Insurer in advance and thus determined for the long-term performance warranty in the attached Extended Warranty. Any changes in the warranted performance level have to be agreed by the Insurer. Failure to do so will limit Insurer's obligations, in case the system performance of an ES System in an Insured Project falls below the Insured System Performance for this Insured Project, to the performance level of the ES Systems set out in the exhibits to the present contract.
3. It shall be a condition precedent to indemnification under this Policy that there has been no payment made for the same Loss for the respective year under the Corporate Cover.
4. It shall be a condition precedent to indemnification under both this Policy and the Corporate Cover Policy that the Insured has provided in writing the terms and conditions of the Solvency Cover to the Buyer of the Insured Project, either by way of providing a summary insurance document produced by the Insurer or by providing the Corporate Cover Policy.
5. It shall be a condition precedent to indemnification under both this Policy and the Corporate Cover Policy that ES Systems are operated within the Normal Application.

III. EXCLUSIONS

In addition to the exclusions set forth in the Extended Warranty, the Insurer shall not be liable to pay any Loss arising out of, relating to or resulting directly or indirectly from, caused by, contributed to by or payable under:

- A. Any payment made by the Insured to the Beneficiary that is not covered by the Extended Warranty;
- B. Any commercial dispute between the Insured and the Beneficiary;

- C. Any (i) Insured Event of which the Insured had actual knowledge or which should have been known through reasonable due diligence prior to or at the date of Inception or (ii) material inaccuracy or incompleteness in the Application;
- D. Any fraud or wilful intent to deceive the Insurer committed by the Insured or the Beneficiary, or any gross negligence on the part of any of the Insured or the Beneficiary;
- E. Any type of assets (including but not limited to external cabling, mounting or base systems, etc.) except the ES System itself;
- F. Use of the ES System outside of the Normal Application as verified by the Independent Expert;
- G. Any kind of unforeseen, accidental, or sudden physical loss or damage (including but not limited to thermal runaway, fire, explosion, aircraft impact and any type of natural catastrophe);
- H. Any repair or replacement of components that are not defective, in particular any pre-emptive repair or replacement of non-defective components to eliminate a potential loss that might fall under a serial loss with a joint root cause;
- I. Any Cyber Loss.

For the purposes of this exclusion:

- “Computer System” means any computer, hardware, software, communications system, electronic device (including, but not limited to, smart phone, laptop, tablet, wearable device), server, cloud or microcontroller including any similar system or any configuration of the aforementioned and including any associated input, output, data storage device, networking equipment or back up facility, owned or operated by the Insured or any other party.
- “Cyber Act” means an unauthorised, malicious or criminal act or series of related unauthorised, malicious or criminal acts, regardless of time and place, or the threat or hoax thereof involving access to, processing of, use of or operation of any Computer System.
- “Cyber Incident” means
 - a) any error or omission or series of related errors or omissions involving access to, processing of, use of or operation of any Computer System; or
 - b) any partial or total unavailability or failure or series of related partial or total unavailability or failures to access, process, use or operate any Computer System.
- “Cyber Loss” means any loss, damage, liability, claim, cost or expense of whatsoever nature directly or indirectly caused by, contributed to by, resulting from, arising out of or in connection with any Cyber Act or Cyber Incident including, but not limited to, any action taken in controlling, preventing, suppressing or remediating any Cyber Act or Cyber Incident

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- J. Any failure or interruption caused by whatsoever reason to a third party infrastructure or service provider, including but not limited to telecommunications, internet service, satellite, cable, electricity ;
- K. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, mutiny, conspiracy, military or usurped power, confiscation, nationalization, commandeering, requisition or destruction or damage by or under the order of any government de jure or de facto or by any public or local authority;
- L. The acts of any person or persons acting on behalf of or in connection with any organization with activities directed towards the overthrowing or influencing of any government de jure or de facto

by force or violence;

- M. Any act of Terrorism including loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to any act of Terrorism;
- N. Any ionizing radiation or radioactive contamination from any nuclear fuel or nuclear waste or from the combustion of nuclear fuel;
- O. Any radioactive, toxic, explosive or otherwise hazardous or contaminating properties of any nuclear installation, reactor or other nuclear assembly or nuclear component thereof;
- P. Any weapon or device employing atomic or nuclear fission and/or fusion or any other similar reaction or radioactive force or matter;
- Q. Any fault, defect, error or omission in design, plan or specifications of the ES System. If the modules are produced in accordance to the Technical Specification, any defects shall not be considered as design defect.
- R. Any pollution and/or contamination, directly or indirectly, arising from any cause whatsoever and any loss, cost or expense due to any request, demand or order that any Insured or others test for, monitor, clean-up, remove, contain, treat, detoxify or neutralize or in any way respond to, or assess the effects of any solid, liquid, gaseous or thermal irritant or contaminant; or any claim or suit by or on behalf of a governmental authority for damages because of testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralizing or in any way responding to, or assessing the effects of any solid, liquid, gaseous or thermal irritant or contaminant.
- S. Any actual or alleged loss, liability, damage, compensation, injury, sickness, disease, death, medical payment, defense cost, cost, expense or any other amount incurred by or accruing to the Insured, directly or indirectly and regardless of any other cause contributing concurrently or in any sequence, originating from, caused by, arising out of, contributed to by, resulting from, or otherwise in connection with a Communicable Disease or the fear or threat (whether actual or perceived) of a Communicable Disease.

As used herein, a Communicable Disease means any disease which can be transmitted by means of any substance or agent from any organism to another organism where:

- i. The substance or agent includes, but is not limited to, a virus, bacterium, parasite or other organism or any variation thereof, whether deemed living or not, and
- ii. The method of transmission, whether direct or indirect, includes but is not limited to, airborne transmission, bodily fluid transmission, transmission from or to any surface or object, solid, liquid or gas or between organisms, and
- iii. The disease, substance or agent can cause or threaten bodily injury, illness, emotional distress or damage to human health, human welfare or property damage.

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- T. any liability arising out of claims under any maintenance contracts from the Buyer or any third party.

IV. GENERAL TERMS AND CONDITONS

A. Adherence to Terms and Conditions

The Insurer's liability shall be contingent on the Insured's and Beneficiary's due observance and fulfilment of the terms and conditions of this Policy.

B. Representations and Warranties

By accepting this Policy, the Insured represents and warrants that:

1. It is purchasing the coverage described in this Policy with full knowledge and acceptance of its terms and conditions without any reliance on any representation, warranty, advice or other statement by the Insurer or any of its representatives or advisors regarding any legal, tax or accounting implications or requirements of the coverage described in this Policy;
2. It owes a duty to the Insurer to disclose any and all information that is relevant and material to the Insurer so as to enable it to determine whether to provide this Policy ;
3. The information and material disclosed to the Insurer is complete and accurate in any and all material manner and not misleading and no information or material has not been disclosed to the Insurer that, if disclosed to the Insurer would, individually or taken together, materially affect the issuance of this Policy or Insurer's liability hereunder in any material manner;
4. It has no knowledge or information of any matter, fact or circumstance, which is likely to give rise to a Loss as of the Inception Date.
5. It owes a duty to notify the Insurer after Policy inception without undue delay of any circumstances that may increase the risk. These factors include, but are not limited to, changes in the performance of individual components of the ES Systems.

Legal consequences:

In the event of a breach of the pre-contractual duty of disclosure (clauses 2 to 4 above), the Insurer is entitled to cancel the policy from inception if this breach was intentional or grossly negligent. In all other cases, the Insurer is entitled to terminate or adjust this Policy.

In the event of a breach of the obligation to inform about increases in risk (clause 5 above), the Insurer may terminate this Policy, reasonably increase the Premium or exclude the risk-increasing circumstances from cover.

In particular: The Insurer reserves the right not to cover ES Systems affected by the change in performance with a Commercial Operation Date after the Insured has become aware of the increase in risk in the event of failure to notify the insurer of such a change.

C. Insured's Obligations

1. Notification of Commercial Operation Date of ES Systems

The Insured shall provide the Insurer the information set forth below, unless further specified in Exhibit H.

- a. The information as set forth in Exhibit G regarding the respective Insured Project;
- b. A written statement from the Insured that the specifications and performance levels of all installed ES Systems have been verified via an Applicable Test prior to the Commercial Operation Date;
- c. A duly executed commissioning report, including any relevant verification documentation and data.

2. Monitoring

The Insured and in case of Insolvency of the Insured, the Beneficiary shall continuously monitor each covered ES System according to the terms and conditions set forth in Exhibit H. These monitoring services may be carried out for the Insured and in case of Insolvency of the Insured, the Beneficiary by a third-party data analytics provider.

3. Additional Notifications

The Insured and in case of Insolvency of the Insured, the Beneficiary shall provide the Insurer with a bordereau of the Insured Tasks carried out on the Insured Projects during the liability period on an annual basis, upon request.

4. Cooperation and Information

The Insured and in case of Insolvency of the Insured, the Beneficiary shall use its best efforts, and to the extent possible shall cause its respective affiliates to, cooperate with the Insurer and, in a timely manner, provide the Insurer with complete and accurate information in connection with any notifications of circumstances or claims (including Claim Notice – Exhibit I)- or other matter relating to this Policy.

5. Examination and Audit Rights

The Insured and in case of Insolvency of the Insured, the Beneficiary shall permit the Insurer upon reasonable notice in writing (including email) to examine, photocopy and take extracts from the books, records, data, files and information of the Insured and in case of Insolvency of the Insured, the Beneficiary and its respective affiliates and grant access to the Insured's and in case of Insolvency of the Insured, the Beneficiary's and its respective affiliates' representatives (including auditors or external professional advisors) for interviews and depositions during normal business hours and at reasonable locations.

6. Operation and Maintenance

The Insured and in case of Insolvency of the Insured, the Beneficiary shall take care that, in addition to the technical conditions set forth in Exhibit H, all ES Systems are installed, commissioned, operated, and uninterruptedly maintained strictly according to the manufacturer's requirements, schedules and specifications, solely by authorized employees or qualified direct subcontractors.

D. Claims

1. Conditions Precedent

It shall be a condition precedent to indemnification under this Policy that the following requirements are satisfied:

a) Amount of Loss

The Loss exceeds the Deductible.

b) Mitigation

The Beneficiary shall as far as possible protect and preserve the ES Systems during and after a Insured Event and take reasonable care to reduce the Loss.

c) Notification of Insured Event

The Beneficiary undertakes to notify the Insurer immediately of any Insured Event as soon as the Project Deductible of the Insured Project has been reached.

In no event shall the Beneficiary contact the Independent Expert regarding an Applicable Test for an Insured Event prior to notifying the Insurer of the Insured Event.

d) Claims filing procedure

The Beneficiary shall deliver a Claim Notice in the form attached hereto as Exhibit I to the Insurer, signed by an authorized representative of the Beneficiary, as soon as reasonably practicable but no later than 90 days after becoming aware of the Insured Event.

e) Withdrawal of Claim against Insured (if necessary)

If the Beneficiary has submitted a claim to the Insured, then the Beneficiary shall also submit written proof to the Insurer that such claim has been irrevocably withdrawn.

f) Insolvency/Due Diligence against Insured

Any Claims Notice submitted by the Beneficiary shall include proof of Insolvency of the Insured.

g) Independent Expert

If the Insurer chooses to retain an Independent Expert upon receipt of the Claim Notice, the Independent Expert shall be notified by the Insurer within 15 calendar days. The Beneficiary will be informed about the instruction simultaneously.

The Independent Expert shall be instructed by the Insurer to investigate the Insured Event under this Policy at Insurer's expense.

The Independent Expert shall prepare a first report within 15 days after instruction, containing the following information:

- a. The results of the Applicable Test of all ES Systems of the Insured Project for which an Insured Event occurred;
- b. The determination of the root cause of any defect of the ES Systems and their failure to meet the Insured System Performance.
- c. The Insured Tasks that are necessary for the ES Systems to satisfy the Insured System Performance.

h) Independent Expert's Report

If appointed, the Independent Expert's report and determination of the necessary Insured Tasks set forth in the General Terms and Conditions of this Policy will be taken as the basis for the settlement of the Loss under the terms of this Policy.

i) Updates and Information

Subsequent to delivery of any Claim Notice:

- a. the Beneficiary shall keep the Insurer and the Independent Expert (if applicable) informed about the development of any Insured Event.
- b. furnish any other information and documentary evidence that the Insurer or the Independent Expert may require regarding such notification;
- c. the Beneficiary or anyone acting on its behalf shall comply with any reasonable recommendations the Insurer or Independent Experts may make following the notification of any Loss.

j) Cooperation and Information

The Beneficiary shall, and to the extent possible shall cause its affiliates to cooperate with the Insurer and, in a timely manner, provide the Insurer with complete and accurate information in connection with any notifications of circumstances or claims (including a Claim Notice) or other matter relating to this Policy.

k) Examination and Audit Rights

The Beneficiary shall permit the Insurer upon reasonable notice to examine, photocopy and take extracts from the books, records, data, files and information of the Beneficiary and its respective affiliates and grant access to the Beneficiary's and its respective affiliates' representatives (including auditors or external professional advisors) for interviews and depositions during normal business hours and at reasonable locations.

l) Maintenance and Records

Until the later of 365 days after (i) the expiration of the respective Indemnity Period and (ii) the final resolution of all claims or disputes relating to this Policy, the Beneficiary shall, and to the extent possible, shall cause its affiliates to maintain all information as required in the Claims Notice Form and all of their respective materials relating to the historical performance monitoring of the respective ES Systems.

m) Assignment of Rights

In the event of any payment by the Insurer in connection with this Policy, the Beneficiary shall assign to the Insurer all of the Beneficiary's respective rights against the Insured.

n) Subrogation

- (1) The Beneficiary shall preserve any indemnification or other rights against any other person or entity for any Loss and preserve the Insurer's subrogation rights with respect thereto, including but not limited to the Beneficiary's claim against the Insured.
- (2) In the event of any payment by the Insurer in connection with this Policy, the Insurer shall be subrogated to, and the Beneficiary shall assign to the Insurer, all of the Beneficiary's respective rights of recovery against any person or entity based upon, arising out of or relating to such payment. If the Beneficiary is unable to assign such rights to the Insurer, or if the Insurer desires, then, instead of assigning such rights to the Insurer, the Beneficiary shall allow the Insurer to bring suit in the Beneficiary's name. The Beneficiary shall, and to the extent possible shall cause its respective affiliates to, execute all papers required and take all steps reasonable, necessary or advisable to secure and further such subrogation and assignment rights. In no event shall the Beneficiary or its respective affiliates waive any rights that could adversely affect any such subrogation or assignment rights. Any amounts recovered by the Insurer in connection with the exercise of its subrogation or assignment rights shall be applied first to reimburse the Insurer for any Loss paid by the Insurer pursuant to this Policy and for any costs or expenses incurred in connection with such recovery and then the remainder of such recovered amounts shall be paid to the Beneficiary.
- (3) The Beneficiary shall defend at its own expense, and satisfy any liability with respect to, any counterclaim or third party demand asserted in connection with any subrogation or assignment claim pursued by the Insurer.

2. Insurer's Response

Payment for a valid and payable claim shall be made as soon as reasonably practicable, but no later than 45 days upon receipt of a Claim Notice or the report of the Independent Expert Report (if applicable) and all other information necessary to verify coverage under this Policy.

3. Offsetting Recoveries

A Loss shall be reduced by any offsetting recoveries (including recoveries from any other insurance

policies or indemnities).

E. Inspection of ES Systems

The Insurer reserves the right to instruct experts to inspect and carry out tests on the relevant ES Systems.

F. Cancellation

Cancellation by Insured:

No Refund shall be applicable on cancellation of this policy.

Cancellation by Insurer:

The Insurer has the right to cancel this Policy with twenty (20) business days prior written notice in case the True-Up Premium is not paid by the Insured although the Insured is not insolvent. The Insurer can also cancel the policy on the grounds of established fraud, by giving prior notice.

G. Other Insurance Coverage

If there is other collectible insurance for the Loss, the Policy will cover as excess insurance and will not contribute with such other insurance. The Insured will not insure or seek to insure the Deductible and the Co-Payment without the prior written consent of the Insurer.

H. Reimbursements

After any payment by the Insurer in connection with this Policy, (i) if it is determined pursuant to the procedures set forth in this Policy that all or any portion of the amount paid did not constitute Loss or is excluded from coverage under this Policy or (ii) if any of the Beneficiary or its respective affiliates receive, directly or indirectly, amounts from any insurance, indemnification or other source which reduces the amount of Loss actually incurred, then the Beneficiary or its affiliates shall promptly, and in no event later than 60 days after such determination or receipt, reimburse or refund to the Insurer the amount overpaid.

I. Titles

The titles of paragraphs, sections, provisions, or endorsements of or to this Policy are intended solely for convenience and reference, and are not deemed in any way to limit or expand the provisions to which they relate and are not part of the Policy.

J. Severability

If any provision of the Policy is found by any governmental authority or court of law to be invalid or unenforceable, the invalidity or unenforceability of such provision shall not affect the other provisions of the Policy and all provisions not affected by such invalidity or unenforceability shall remain in full force and effect. The Parties hereby agree to attempt to substitute for any invalid or unenforceable provision a valid or enforceable provision that achieves to the greatest extent possible the economic, legal and commercial objectives of the invalid or unenforceable provision.

K. Inconsistency

In case of any difference or inconsistency in the terms and conditions between this Policy and the Extended Warranty, the terms and conditions of this Policy shall prevail.

L. Language

All notices and communication (including accompanying documentation, annexes, exhibits and

attachments) to be made under or in connection with this Policy shall be made in the English language.

M. Currency

All statements of account, reports, financial statements, claims notifications, loss reports and all payments between the parties shall be reported in the currency or currencies specified in the Schedule. For the purpose of this Policy, any other currencies shall be converted at the rates of exchange used in the Insurer's books or where there is a specific remittance for a loss settlement at the rates of exchange used at the date the claim is submitted to the Insurer by the Insured. Rates of exchange shall be the official RBI Reference rates.

N. Notice

Any notice (including a Claim Notice) or other communication concerning the subject matter of this Policy shall be made in writing and shall be effective upon receipt, and (i) if to the Beneficiary, shall be delivered to the Beneficiary at its mailing address or email address set forth in the Schedule, and (ii) if to the Insurer, shall be delivered to it at the following address:

HDFC ERGO General Insurance Company Limited
6th Floor Leela Business Park
Andheri Kurla Road, Andheri East
Mumbai-400059
India

O. No Benefit to Third Parties

Except as expressly set forth in this Policy with respect to the Beneficiaries, none of the provisions in this Policy shall be for the benefit of or be enforceable by any person other than the Insurer and the Insured and its respective permitted successors and assigns.

P. Limitation

Unless otherwise agreed, claims under this Policy shall be time-barred and unenforceable under or with respect to this Policy or otherwise, unless reported in writing to the Insurer and made within one (1) year of the date the Insured or its representative first became aware of, or were made aware of a Loss. In no event shall a claim be covered under this Policy that is made after 45 days after the expiration of the Indemnity Period.

Q. Waiver and Amendment

The terms of this Policy may not be waived or amended except pursuant to a written endorsement executed and issued by the Insurer and consented to by the Insured.

R. Assignment

This Policy and the rights and obligations hereunder are not assignable by the Insured without the prior written consent of the Insurer.

S. Entire Agreement

This Policy constitutes the entire agreement and understanding concerning the subject matter of this Policy and supersedes any prior oral or written agreements, discussions or other communications entered into between the Insurer and the Insured concerning the subject matter of this Policy.

T. Sanction

No (Re)Insurer shall be deemed to provide cover and no Insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such

claim or provision of such benefit would expose that Insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union or United States of America, provided that this does not violate any regulation or specific national law applicable to the (Re)Insurer.

U. Governing Law and Jurisdiction

The construction, validity and performance of this Policy shall be governed by the laws as set forth in the Schedule, without regards to conflicts-of-laws principles.

Each of the Parties irrevocably agrees that the courts of the jurisdiction stated in the Schedule shall have exclusive jurisdiction to hear and decide any suit, action or proceedings, or to settle any disputes, which may arise out of or in connection with this Policy or its formation or validity.

V. Arbitration Clause

The parties to the contract may mutually agree and enter into a separate Arbitration Agreement to settle any and all disputes in relation to this policy. Arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

Grievance Redressal Procedure

If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, You can address Your grievance as follows:

Our Grievance Redressal Officer

If you have a grievance that you wish us to redress, you may contact us with the details of your grievance through:

- Call us: 18002677444
- Write to us – grievance@hdfcergo.com
- Senior Citizens: 022 6158 2026 | Email ID: seniorcitizen@hdfcergo.com.
- Company Website – www.hdfcergo.com
- Courier - Any of our Branch office or corporate office

You may also approach the Complaint & Grievance (C&G) Redressal Cell at any of our branches with the details of your grievance during our working hours from Monday to Friday. **Branch wise list of our customer grievance officers is updated on the website.**

If you are not satisfied with our redressal of your grievance through one of the above methods, you may contact our Head of Customer Service at

**The Complaint & Grievance Redressal Cell,
HDFC ERGO General Insurance Company Ltd.
D-301,3rd Floor, Eastern Business District (Magnet Mall),
LBS Marg, Bhandup (West),
Mumbai – 400078, Maharashtra**

In case you are not satisfied with the response / resolution given / offered by the C&G cell, then you can write to the Chief Grievance Officer of the Company at the following address

**To the Chief Grievance Officer
HDFC ERGO General Insurance Company Limited
D-301, 3rd Floor, Eastern Business District (Magnet Mall),
LBS Marg, Bhandup (West),
Mumbai - 400078, Maharashtra
e-mail: cgo@hdfcergo.com**

Grievance may also be lodged at IRDAI Integrated Grievance Management System- <https://bimabharosa.irdai.gov.in>

You may also approach the nearest Insurance Ombudsman for resolution, if your grievance is not redressed by the Company. The contact details of Ombudsman offices are below if your grievance pertains to:

- Insurance claim that has been rejected or dispute of a claim on legal construction of the policy
- Delay in settlement of claim
- Dispute with regard to premium
- Non-receipt of your insurance document

You may also refer Our website www.hdfcergo.com”<https://www.hdfcergo.com/customer-voice/grievances> for detailed grievance redressal procedure.

Names of Ombudsman and Addresses of Ombudsmen Centers

Please refer to the webpage <https://www.cioins.co.in/Ombudsman> for the most up-to-date list of Ombudsman offices and their respective jurisdictions, as the list provided below is subject to frequent changes. Additionally, you may lodge an online complaint through the Council for Insurance Ombudsmen (CIO) website at www.cioins.co.in

Office Details	Jurisdiction of Office Union Territory, District)
AHMEDABAD Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor,Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02 Email: oio.ahmedabad@cioins.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu
BENGALURU - Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: oio.bengaluru@cioins.co.in	Karnataka
BHOPAL Office of the Insurance Ombudsman, 1st floor,”Jeevan Shikha”, 60-B, Hoshangabad Road, Opp. Gayatri Mandir, Bhopal – 462 011. Tel.: 0755 - 2769201 / 2769202/ 2769203 Email: oio.bhopal@cioins.co.in	Madhya Pradesh, Chattisgarh
BHUBANESHWAR Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 /2596455/ 2596003/ 2596429 Email: oio.bhubaneswar@cioins.co.in	Odisha
CHANDIGARH Office of the Insurance Ombudsman, Jeevan Deep Building SCO 20-27, Ground Floor Sector- 17 A, Chandigarh – 160 017. Tel.: 0172-2706468 Email: oio.chandigarh@cioins.co.in	Punjab, Haryana (excluding Gurugram, Faridabad, Sonapat and Bahadurgarh), Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh.

Office Details	Jurisdiction of Office Union Territory, District)
CHENNAI Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24333678 Email: oio.chennai@cioins.co.in	Tamil Nadu Puducherry Town and Karaikal (which are part of Puducherry).
DELHI Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011-46013992/23213504/23232481 Email: oio.delhi@cioins.co.in	Delhi & following Districts of Haryana - Gurugram, Faridabad, Sonapat & Bahadurgarh.
GUWAHATI Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Near. Pan bazar, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2632205/2631307 Email: oio.guwahati@cioins.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura
HYDERABAD Office of the Insurance Ombudsman, 6-2-46, 1st floor, “Moin Court”, Lane Opp. Hyundai Showroom, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 – 23376991/ 23376599/ 23312122/23328709 / 23325325 Email: oio.hyderabad@cioins.co.in	State of Andhra Pradesh, Telangana and Yanam – a part of Union Territory of Puducherry
JAIPUR Office of the Insurance Ombudsman, JeevanNidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 – 2740363 Email: oio.jaipur@cioins.co.in	Rajasthan
KOCHI - Office of the Insurance Ombudsman, 10th Floor, Jeevan Prakash, LIC Building, Opp to Maharaja’s College Ground, M.G. Road, Kochi - 682 011. Tel.: 0484 – 2358759 Email: oio.ernakulam@cioins.co.in	Kerala Lakshadweep, Mahe - a part of Union territory of Puducherry
KOLKATA - Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 7th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 Fax : 033 - 22124341 Email: oio.kolkata@cioins.co.in	States of West Bengal, Sikkim Andaman & Nicobar Islands
LUCKNOW - Office of the Insurance Ombudsman, 6th Floor, JeevanBhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 4002082 / 3500613 Email: oio.lucknow@cioins.co.in	Districts of Uttar Pradesh : Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.

Office Details	Jurisdiction of Office Union Territory, District)
MUMBAI Office of the Insurance Ombudsman, 3rd Floor, JeevanSevaAnnexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 69038800/27/29/31/32/33 Email: oio.mumbai@cioins.co.in	List of wards under Mumbai Metropolitan Region excluding wards in Mumbai – i.e M/E, M/W, N , S and T covered under Office of Insurance Ombudsman Thane and areas of Navi Mumbai.
NOIDA - Office of the Insurance Ombudsman, Bhagwan Sahai Palace, 4th Floor, Main Road, Naya Bans, Sector 15, Distt: GautamBuddh Nagar, U.P-201301. Tel.: 0120- 2514252 / 2514253 Email: oio.noida@cioins.co.in	State of Uttarakhand and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bu- landshehar, Etah, Kannauj, Mainpuri, Mathura, Meerut, Morad- abad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautam Buddh nagar, Ghaziabad, Hardoi, Shahja- hanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.
PATNA - Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna 800 001. Tel.: 0612-2547068 Email: oio.patna@cioins.co.in	Bihar, Jharkhand
PUNE - Office of the Insurance Ombudsman, Jeevan Darshan LIC Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020- 24471175 Email: oio.pune@cioins.co.in	State of Goa and State of Maharashtra excluding areas of Navi Mumbai, Thane district, Palghar District, Raigad district & Mumbai Metropolitan Region
THANE - Office of the Insurance Ombudsman, 2nd Floor, Near New RTO Office, Louis Wadi, Vasantrya Naik Mahamarg, Thane (West)- 400604 Tel.: 022-20812868/69 Email: oio.thane@cioins.co.in	Area of Navi Mumbai, Thane District, Raigad District, Palghar District and wards of Mumbai, M/East, M/West, N, S and T.

VI. Table of Exhibits

- A. Energy Storage System Warranty Insurance - Corporate Cover
- B. Empty
- C. Extended Warranty
- D. Empty
- E. Assembly List
- F. Empty
- G. Notification of Insured Projects
- H. Technical Conditions
- I. Individual Claims Notice Form
- J. Empty
- K. Tariff (if applicable)

Exhibit A: Energy Storage System Warranty Insurance - Corporate Cover

The Energy Storage System Warranty Insurance - CORPORATE COVER with Policy Number [to be added by UW] is herewith part of this Policy.

Exhibit C: Extended Warranty

The following documents were submitted by email to the Insurer.

Document Type	Document Name	from	to	Sent
OEM Warranty	Specify document or refer to datasheets as per other exhibit			
Project Supply Agreement				
Long Term Service Agreement				
Test Methodology				

Out of the documents referenced above, only the following documents and sections are covered under this Policy:

- [E.g. OEM Warranty, section 1a]
- [E.g. OEM Warranty, section 2]

Exhibit E: Assembly List (in [CCY] per Unit)

ID	Assembly	Insured?	Designation	Number of units	Costs (For full replacement)	Annual Inflation
0	Battery Cell	yes / no			Comp Transport Labor	Comp Transport Labor
1	ES Unit	yes / no				
2	Battery Module	yes / no				
3	Rack HV-Control Box	yes / no				
4	Battery Cooling Unit / Chiller	yes / no				
5	HVAC	yes / no				
6	Fire Suppression System	yes / no				
7	DC Combiner & Control	yes / no				
8	Inverter / Converter	yes / no				
9	MV Transformer	yes / no				
10	MV Switchgear	yes / no				

The following datasheets for the Assemblies were submitted by email to the Insurer.

The Description for the Assemblies Fire Suppression System and DC Combiner & Control are contained in the Datasheet ES Unit.

Document Type	Document Name	from	to	Sent
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Battery Cell				
ES Unit				
Battery Pack/Module				
Rack HV-Control box				
Battery Cooling Unit / Chiller				
HVAC				
Inverter / Converter				
MV Transformer				
MV Switchgear				

Exhibit G: Notification of Insured Projects

For every installed Assembly as defined in Exhibit E (if not listed per Project):

- Assembly Type
- Type designation
- serial numbers

Per Insured Project

- Project Name / Identifier
- Buyer / Beneficiary
- Project Address or latitude and longitude of main gate
- Sales Date
- Warranty Start Date
- Commercial Operation Date
- Warranty Duration
- Nominal System Power
- Nominal System Energy
- Usable System Energy verified through the Applicable Test
- List of Insured Assemblies with Type designation and number of units
- Serial numbers for all installed Assemblies

Exhibit H: Technical Conditions

Only those ES Systems are insured under this Policy which comply with the specifications set forth in the exhibits, provided that:

- each battery was manufactured not more than twelve months before the start date of the Extended Warranty in a production facility following a Bill of Materials (BoM) which received product certifications according to IEC-62619 or UL1973 and IEC-62620 or GB/T36276 from an accredited certification body listed as issuing National Certification Body (NCB) at IEC System of Conformity Assessment Schemes for Electrotechnical Equipment and Components (IECEE); and
- each Insured ES System complies with the technical specifications and is labelled with a nameplate that displays the manufacturer, a unique serial number, the product type, nominal ratings, and the applicable and valid certification mark issued by an accredited certification body; and
- all components were checked against any damage, excessive thermal stress and deep discharge before and during installation and issues were detected and resolved in a timely manner; and
- each Insured ES System is continuously monitored for at least the parameters of voltage, current, impedance, and temperature at critical positions, with a reasonable sampling time, in accordance with best industry practice.
- [Optional] each ES System's performance and degradation are analysed and reported at least annually,

and the Insurer will be provided with this information upon request.
The following documents were submitted by email to the Insurer.

Document Type	Document Name	from	to	Sent
BMS set-point and alarm list	Specify document or refer to datasheets as per other exhibit			
Derating tables				

Exhibit I: Claims Notice Form

To:
Specialty Underwriting
HDFC ERGO General Insurance Company Limited
6th Floor Leela Business Park
Andheri Kurla Road, Andheri East
Mumbai-400059
India

with a copy sent simultaneously to:

Claims Department
HDFC ERGO General Insurance Company Limited
6th Floor Leela Business Park
Andheri Kurla Road, Andheri East
Mumbai-400059
India

Claims Notice

I Insurance Contract

Policy Number Insured _____
Insured's address _____
Contactperson _____

II Affected Repair Tasks and Costs

Reporting Period _____

Number of repair activities _____
Cost of repair activities _____
Reason for repair _____
Datasheet feature that was not met _____
Warranty promise that would be violated without the repair _____
Assembly list items affected _____
Number of components repaired _____
Number of components replaced _____
Manufacturing Fault Detected _____
Material Defect Identified _____
Excessive Material Ageing Found _____

Please send for each related customer complaint:

- Complaint report with date, reason, problem description, etc.
- Solution applied, root cause found
- Insured Task performed for remediation
Please send for each Insured Task:
- Action report with date, duration, reason, etc.

E. Serial numbers of repaired and replaced parts

III Reimbursement Estimation

Reporting Period _____
Date of most recent Insured Tasks being executed _____
Total OPEX spent for Insured Tasks already executed _____
Further OPEX expected from upcoming Insured Tasks due to known warranty issues _____

Further OPEX expected from Insured Tasks due to planned maintenance in reporting period _____

Total OPEX expected in reporting period _____
Deductibles and Co-Payment applicable _____
Reimbursements estimated _____

DECLARATION BY THE INSURED

THE SIGNATORY CONFIRMS WITH HIS/HER SIGNATURE THAT HE/SHE HAS THE POWER TO REPRESENT THE COMPANY TO SIGN AND EXECUTE THIS CLAIM NOTICE AND THAT TO THE BEST OF HIS/HER KNOWLEDGE AND BELIEF (HAVING MADE FULL, COMPLETE, DUE AND PROPER INQUIRIES), THE INFORMATION GIVEN IN THIS CLAIM NOTICE IS – AS OF THE DATE OF SIGNING - TRUE, ACCURATE AND COMPLETE IN EVERY MATERIAL DETAIL AND HE/SHE HAS NOT WITHHELD ANY MATERIAL FACT WHICH COULD HAVE OR ONE COULD REASONABLY EXPECT TO HAVE AN EFFECT ON THE INSURER'S DETERMINATION OF THE POTENTIAL LOSS AND ITS SIZE.

THE SIGNATORY UNDERTAKES TO INFORM THE INSURER IMMEDIATELY AFTER IT HAS COME TO HIS/HER KNOWLEDGE THAT ANY INFORMATION GIVEN IN THIS CLAIM NOTIFICATION FORM TURNS OUT TO BE INCORRECT, INACCURATE OR INCOMPLETE.

ALL ATTACHMENTS TO THIS CLAIM NOTIFICATION FORM HAVE TO BE DATED AND SIGNED AS WELL.

Date: _____

Signature of Company