

GERALD E. PEARSON
OLAN PARKER, JR.

LAW OFFICES
PEARSON & PARKER
JONESBORO, ARKANSAS

Area Code 501
932-4522

Citizens Bank Building

January 6, 1967

Mrs. Phyllis Stringer, City Clerk
City Hall
Jonesboro, Arkansas

In Re: Jonesboro Cable TV, Inc.

Dear Mrs. Stringer:

In compliance with Section 9 of Ordinance No. 1142 adopted November 21, 1966, granting to the above company a franchise for a community antenna television system, I am enclosing herewith for your records two Certificates of Insurance which equals or exceeds the requirements set out in Section 9 of said Ordinance.

Very truly yours,



Gerald Pearson

GP:js

Encls: 2



Certificate of Insurance

MEMBERS OF FIRM
 W J BLOUNT
 W W TAYLOR
 FRANK L THOMPSON
 GEORGE GARTNER
 D W SWEENEY
 W J BLOUNT JR
 JOHN A MAXWELL
 ROBERT MCFAIL
 ORVILLE NEAL
 C B SMITH
 E L MOORE
 JOHN V POLK JR.
 DELBERT W TUCKER

1100 W. 7TH ST.
 FORT WORTH, TEXAS 76102

Date **DECEMBER 15, 1966**

TO **CITY WATER & LIGHT PLANT,**
 Address **AN IMPROVEMENT DISTRICT**
400 E. MONROE ST.
JONESBORO, ARKANSAS

July

This is to certify that the policies designated below are in force on the date borne by this Certificate.

NAME OF ASSURED **JONESBORO CABLE TV, INC.**
c/o 400 W. SEVENTH ST.
 Address **FORT WORTH, TEXAS**

KIND OF INSURANCE	POLICY NO.	EXPIRATION DATE	LIMITS OF LIABILITY	
WORKMEN'S COMPENSATION			Benefits as provided by the Compensation Law of the State of ARKANSAS EL - \$25,000.	
	WCO40 4276060	1-1-68		
COMPREHENSIVE GENERAL CONTRACTORS' PUBLIC LIABILITY				
1 Bodily Injury	CCPO40 4068746	1-1-68	\$ 100,000.	each person
2 Property Damage	HOLD HARMLESS AGREEMENT COVERED.		\$ 300,000.	one accident - OCCURRENCE
			\$ 100,000.	each accident - OCCURRENCE
			\$ 100,000.	aggregate
OWNED AUTOMOBILE LIABILITY				
1 Bodily Injury	CCPO40 4068746	1-1-68	\$ 100,000.	each person
2 Property Damage			\$ 300,000.	one accident - OCCURRENCE
			\$ 100,000.	each accident - OCCURRENCE
			\$ 100,000.	aggregate
NON-OWNERSHIP AUTOMOBILE LIABILITY				
1 Bodily Injury	CCPO40 4068746	1-1-68	\$ 100,000.	each person
2 Property Damage			\$ 300,000.	one accident - OCCURRENCE
			\$ 100,000.	each accident - OCCURRENCE
			\$ 100,000.	aggregate
OWNERS' OR CONTRACTORS' PROTECTIVE LIABILITY				
1 Bodily Injury	CCPO40 4068746	1-1-68	\$ 300,000.	each person
2 Property Damage			\$ 100,000.	one accident - OCCURRENCE
			\$ 100,000.	each accident - OCCURRENCE
			\$ 100,000.	aggregate

The above described policies do not cover sub-contractors.

Other Insurance - **UMBRELLA POLICY - 1-1-64/67 - EMPLOYERS REINSURANCE CORP. - SINGLE LIMIT OF \$2,000,000. - COVERS OVER AND ABOVE UNDERLYING LIMITS SHOWN ABOVE.**

In the event of any material change in or cancellation of said Policies

SEE BELOW

will notify the party to whom this certificate is addressed of such change or cancellation. Cancellation is not to become effective until **30** days after the notice has been received by the addressee and the insured.

CC: ASSURED

CONTINENTAL CASUALTY COMPANY

(Name of Insurer)

Mitchell, Gartner & Thompson

John A Maxwell
 Authorized Representative

SOUTHWESTERN BELL TELEPHONE COMPANY — CERTIFICATE OF INSURANCE

(To be completed and furnished Southwestern Bell Telephone Company in connection with all contracts in Texas)

THIS IS TO CERTIFY to Southwestern Bell Telephone Company that the Policies of Insurance (including endorsements) described below have been issued to the insured named below by the

CONTINENTAL CASUALTY COMPANY

(Insurance Company)

CHICAGO, ILLINOIS

(Home Office and State of Incorporation)

with limits of liability as set forth below in the State of Texas, covering the type of operations described below, and further to certify that said Policies are in full force and effect at this time. It is agreed that none of these Policies will be cancelled or materially changed during the period of coverage as stated herein, until at least ten (10) days written notice prior to cancellation or

material change has been given by registered mail to Southwestern Bell Telephone Company, _____

ATTN: **MR. L.E. VAUGHN, COMMERCE BUILDING, 307 W. 7TH STREET, FORT WORTH, TEXAS.**

(Title and Address)

and that Southwestern Bell Telephone Company will be immediately notified of any reduction or possible reduction below 75% in the aggregate limits of any such policy due to loss or damage applicable to work performed for Southwestern Bell Telephone Company for which said insurance applies. This certificate is issued to the certificate holder, Southwestern Bell Telephone Company, in consideration of the contract or contracts to be awarded to the named insured, and it is understood and agreed that the certificate holder relies on this certificate in the award of such contract or contracts to the named insured.

1. Insured: **JONESBORO CABLE TV, INC. & SOUTHWESTERN BELL TELEPHONE CO.**

2. Address: **c/o 400 W. SEVENTH ST., FORT WORTH, TEXAS**

3. Status of Insured: Corporation Partnership _____ Individual _____ (Other) _____

4. Location of operations covered by the policies described below: **ARKANSAS**

5. Description of operations covered by policies described below: **COMMUNITY ANTENNA POLE ATTACHMENT.**

No deductible provision pertaining to coverages certified to on this certificate exceeds a deductible amount of \$ Nil per occurrence.

INSURANCE POLICIES IN FORCE

COVERAGE	POLICY NUMBER	EFFECTIVE DATE	EXPIRATION DATE	LIMITS OF LIABILITY
I. A. Workmen's Compensation* B. Employers' Liability	CC040-1276060	12-2-66	1-1-68	A. Statutory Limits B. \$100,000.00 (\$100,000.00 required)
II. Comprehensive Automobile** A. Bodily Injury B. Property Damage				A. Each Person— (\$100,000.00 required) Each Accident— (\$300,000.00 required) B. Each Accident— (\$100,000.00 required)
III. Comprehensive General Liability*** A. Bodily Injury B. Property Damage	CC040-1052 CC040-1055/46	1-1-66 1-1-67	1-1-67 1-1-68	A. Each Person— 100,000. (\$100,000.00 required) Each Occurrence— 300,000. (\$300,000.00 required) B. Each Occurrence— 100,000. (\$100,000.00 required) Aggregate— 300,000. (\$300,000.00 required)

HOLD HARMLESS AGREEMENT COVERED.

INSURANCE POLICIES IN FORCE

COVERAGE	POLICY NUMBER	EFFECTIVE DATE	EXPIRATION DATE	LIMITS OF LIABILITY
IV Owner's Protective Liability****				A. Each Person— (\$100,000.00 required)
A. Bodily Injury				Each Occurrence— (\$300,000.00 required)
B. Property Damage				B. Each Occurrence— (\$100,000.00 required)
				Aggregate— (\$300,000.00 required)

THE TERM "OCCURRENCE" AS USED IN III AND IV ABOVE IS DEFINED AS FOLLOWS:

- (A) An event which occurs during the policy period, or
- (B) A continuous or repeated exposure to conditions which result, during the policy period, in bodily injury, sickness or disease, or in injury to or destruction of property, excluding injuries intentionally caused by the insured. Any number of bodily injuries or deaths or cases of sickness or disease or injuries to or destruction of property of one or more persons or organizations, including the loss of use thereof, resulting from a common cause or from exposure to substantially the same general conditions existing at or emanating from each premise location shall be deemed to result from one occurrence.

*Workmen's Compensation Insurance includes coverage in compliance with the Laws of the State of Texas.

**Comprehensive Automobile Insurance includes coverage of insured and all employees of insured maintaining, using or operating any motor vehicle in the performance of the work under contracts with Southwestern Bell Telephone Company.

***Comprehensive General Liability Insurance provides coverage to insured for legal liability arising from occurrences in the performance of the work under contracts with Southwestern Bell Telephone Company and includes coverage for:

Property damage caused by blasting or explosion and collapse of or structural injury to any building or structure. (Required when hazards are inherent in operations under contract to which insurance applies.) Yes No

Property damage to underground utilities and facilities. (Required when hazards are inherent in operations under contract to which insurance applies.) Yes No

****In addition to the Workmen's Compensation, Employer's Liability, Comprehensive Automobile, and Comprehensive General Liability, the Contractor shall obtain, at his expense, an OWNER'S PROTECTIVE LIABILITY INSURANCE POLICY naming Southwestern Bell Telephone Company as Insured. The OWNER'S PROTECTIVE POLICY shall be written by the same insurance company writing the Contractor's above mentioned policies and submitted to Southwestern Bell Telephone Company for review and approval.

December 14, 1966
(Date)

1. ~~Continental Casualty Company~~
2. Liberty Insurance Co. Company
(Name of Insurance Company)

By Don McNeil
Don McNeil, General Superintendent
Fort Texas St., Fort Worth, Texas
(Address)

Approved: _____
Attorney

THE SIGN OF GOOD INSURANCE



Certificate of Insurance

MEMBERS OF FIRM:
 W. J. BLOUNT
 W. W. TAYLOR
 FRANK L. THOMPSON
 GEORGE GARTNER
 D. W. SWEENEY
 W. J. BLOUNT, JR.
 JOHN A. MAXWELL
 ROBERT MCFAIL
 ORVILLE NEAL
 C. B. SMITH
 E. L. MOORE
 JOHN V. POLK, JR.
 DELBERT W. TUCKER

TELEPHONE EDISON 5-1431
 1407 TEXAS AT SUMMIT
 MAILING ADDRESS, P. O. BOX 939
 FORT WORTH 1, TEXAS

Date **JANUARY 6, 1967**

TO **CITY OF JONESBORO, ARKANSAS**
 Address **JONESBORO, ARKANSAS**

Job:
**COMMUNITY ANTENNA
 TELEVISION SYSTEM.**

This is to certify that the policies designated below are in force on the date borne by this Certificate.

NAME OF ASSURED **JONESBORO CABLE TELEVISION, INC.**
 Address **c/o 400 W. SEVENTH ST.
 FORT WORTH, TEXAS**

KIND OF INSURANCE	POLICY NO.	EXPIRATION DATE	LIMITS OF LIABILITY
WORKMEN'S COMPENSATION	WC040 4276060	1-1-68	Benefits as provided by the Compensation Law of the State of ARKANSAS EL - \$25,000.
COMPREHENSIVE GENERAL CONTRACTORS' PUBLIC LIABILITY	CCP040 4068746	1-1-68	\$ 100,000. each person \$ 300,000. one accident OCCURRENCE \$ 100,000. each accident OCCURRENCE \$ 100,000. aggregate
1. Bodily Injury	HOLD HARMLESS AGREEMENT COVERED.		
2. Property Damage			
OWNED AUTOMOBILE LIABILITY	CCP040 4068746	1-1-68	\$ 100,000. each person \$ 300,000. one accident OCCURRENCE \$ 100,000. each accident OCCURRENCE
1. Bodily Injury			
2. Property Damage			
NON-OWNERSHIP AUTOMOBILE LIABILITY	CCP040 4068746	1-1-68	\$ 100,000. each person \$ 300,000. one accident OCCURRENCE \$ 100,000. each accident OCCURRENCE
1. Bodily Injury			
2. Property Damage			
OWNERS' OR CONTRACTORS' PROTECTIVE LIABILITY	CCP040 4068746	1-1-68	\$ 100,000. each person \$ 300,000. one accident OCCURRENCE \$ 100,000. each accident OCCURRENCE \$ 100,000. aggregate
1. Bodily Injury			
2. Property Damage			

The above described policies do not cover sub-contractors.

Other Insurance **UMBRELLA POLICY - 1-1-64/67 - EMPLOYERS REINSURANCE CORP. - SINGLE LIMIT OF \$2,000,000. - COVERS OVER AND ABOVE UNDERLYING LIMITS SHOWN ABOVE.**

In the event of any material change in or cancellation of said Policies

SEE BELOW

will notify the party to whom this certificate is addressed of such change or cancellation. Cancellation is not to become effective until TEN days after the notice has been received by the addressee and the insured.

CC: ASSURED

CONTINENTAL CASUALTY COMPANY

(Name of Insurer)

Mitchell, Gartner & Thompson

John A. Maxwell
 Authorized Representative