

Kenneth J. Kromer  
Director, Risk Management



200 Ports Authority Drive  
Mt. Pleasant, SC 29464  
scspa.com

May 5, 2026

**FY 2027 (JULY 1, 2026 – JUNE 30, 2027) ANNUAL BUSINESS REGISTRATION (ABR) - STEVEDORES**

Enclosed is our *Annual Business Registration Form* (ABR) which is required by the South Carolina State Ports Authority's (SCPA) Marine Terminal Operator Schedule ("MTOS"). This ABR Form must be completed every year by ALL firms that conduct business on SCPA property.

For your registration to be valid, the enclosed *Fiscal Year 2027 Annual Business Registration Form* must be **fully completed and returned no later than May 31, 2026**. Your Certificate(s) of Insurance and copies of **ALL** required endorsements should be submitted to the attention of Risk Management when you initially register, and again as each policy is renewed or replaced. **Failure to complete the process or maintain the required insurance coverages may result in being denied access to SCPA facilities.**

Liability Limits for all Stevedores' must be no less than **\$10,000,000**, primary plus umbrella.

All yard operation support vehicles must be placarded and equipped with appropriate safety devices (Stevedores' and Checkers' vehicles). Parking is permitted in designated areas only.

**NOTE** : ALL users are required to ensure their employees, agents, representatives, and contractors accessing or entering upon SCPA's terminals have watched the SCPA Safety Video and have reviewed and understand SCPA's Terminal Safety Guide, both of which are available on the SCPA's website at <https://scspa.com/facilities/facility-features/terminal-traffic-safety/>.

Please contact Port Police at 843-577-8706 with questions concerning access to terminals and Transportation Worker Identification Credential (TWIC) requirements.

**IF YOU NO LONGER REQUIRE ACCESS TO SCPA FACILITIES**, please email us at [ABR@SCSPA.COM](mailto:ABR@SCSPA.COM) so that we may update our records and remove you from our contact list. Also, your insurance agent should be advised to delete the SCPA from your certificate holder list.

**PLEASE NOTE** : The *Annual Business Registration Packets* can be obtained from the SCPA website at <http://www.scspa.com/resources/risk-management/>.

If you have any questions or need further information, please contact our ABR Representatives at [ABR@SCSPA.COM](mailto:ABR@SCSPA.COM) or 843-577-8176.

Sincerely,

A handwritten signature in black ink that reads "Kromer".

Kenneth J. Kromer  
Director, Risk Management



# SOUTH CAROLINA PORTS

200 PORTS AUTHORITY DRIVE, MT. PLEASANT, SC 29464

07/01/2026 - 06/30/2027

SOUTH CAROLINA STATE PORTS AUTHORITY (“SCPA”) ANNUAL BUSINESS REGISTRATION

AS REQUIRED BY SCPA MARINE TERMINAL OPERATOR SCHEDULE (“MTOS”)

\*USER’S NAME (COMPANY NAME)

\*TYPE OF BUSINESS

\*MAILING ADDRESS

\*CITY

\*STATE

\*ZIP

\*NAME OF PRIMARY CONTACT PERSON

\*TITLE

\*AREA CODE + PHONE NUMBER

\*E-MAIL

\*ALTERNATE CONTACT PERSON, PHONE & EMAIL

\*Describe business activities of User on/or adjacent to the SCPA’s terminals (e.g.: Type of Activity, Frequency, and Terminal):

Pursuant to Rule 34-065 of the MTOS, Users must register with the SCPA and provide proof of insurance prior to conducting any business or operations on or adjacent to SCPA terminals. **Subsequent registration shall take place on July 1 of each year. Inadequate insurance, as determined by the SCPA, shall cause any such registration to be considered invalid until sufficient coverage is established. Required insurance limits are determined by type of business /nature of service provided. NOTE: TWIC ID badge must be secured prior to registration.**

All Users shall provide the SCPA with a Certificate(s) of Insurance (“COI”) evidencing insurance covering their operations and showing the limits of Commercial General Liability (Bodily Injury & Property Damage), Automobile Liability, other applicable liability policies, and South Carolina Workers Compensation, and USL&H/Jones Act coverage, if applicable. **The insurance carrier shall endorse all liability policies, with copies of the endorsements provided with the COI,** to specify that:

- \* (1) SCPA is an **Additional Insured** on all liability policies **except Auto** as to operations on or adjacent to the SCPA’s facilities.
- \* (2) The User’s coverage is **primary and non-contributory** with respect to liability arising from the User’s operations.
- \* (3) **Liability and Workers’ Compensation** policies have been amended to **Waive the Insurer’s Right of Subrogation** in favor of the SCPA.
- \* (4) All policies have been endorsed to provide the SCPA with a thirty-day (30-day) written notice, prior to any policy’s cancellation or material change.

All Users doing business with or conducting activities on SCPA terminals must register their vehicles with the SCPA's Port Police Department.

By its signature below, User acknowledges and agrees that the use of the SCPA's terminals and facilities are governed by the MTOS and said MTOS is hereby incorporated herein by reference. This Annual Business Registration and the MTOS shall be read to be consistent and complimentary. Any conflict among this Annual Business Registration and the MTOS shall be resolved by giving priority to this Annual Business Registration. Unless otherwise defined in this Annual Business Registration, the defined terms in the MTOS shall have the same meanings when used herein.

ALL Users are required to ensure their employees, agents, representatives, and contractors accessing or entering upon SCPA's terminals have watched the SCPA Safety Video and have reviewed and understand SCPA's Terminal Safety Guide, both of which are available on the SCPA's website. The contents of the SCPA Safety Video and the provisions of SCPA's Terminal Safety Guide are incorporated herein by reference and made part of this Annual Business Registration.

*USER HEREBY CERTIFIES, CONVENANTS, REPRESENTS, AND WARRANTS THAT ITS EMPLOYEES, AGENTS, REPRESENTATIVES, AND CONTRACTORS HAVE WATCHED OR WILL WATCH THE SCPA SAFETY VIDEO AND HAVE READ OR WILL READ THE SCPA'S TERMINAL SAFETY GUIDE BEFORE ACCESSING OR ENTERING UPON SCPA'S TERMINALS.*

*USER HEREBY CERTIFIES, COVENANTS, REPRESENTS, AND WARRANTS THAT THE INFORMATION PROVIDED BY USER IN THIS ANNUAL BUSINESS REGISTRATION IS TRUE AND CORRECT AND THAT USER HAS REVIEWED, UNDERSTANDS, AND AGREES TO THE CONTENTS OF THE SCPA SAFETY VIDEO, THE PROVISIONS OF THE SCPA TERMINAL SAFETY GUIDE, AND THE PROVISIONS CONTAINED IN THIS ANNUAL BUSINESS REGISTRATION, INCLUDING TO THOSE IN THE MTOS AND ANY OTHER DOCUMENT OR MEDIA INCORPORATED HEREIN OR THE MTOS BY REFERENCE.*

*THE UNDERSIGNED HEREBY CERTIFIES, COVENANTS, REPRESENTS, AND WARRANTS THAT IT IS DULY AUTHORIZED TO BIND USER AND TO EXECUTE THIS ANNUAL BUSINESS REGISTRATION.*

USER:

\_\_\_\_\_  
COMPANY NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
DATE

\_\_\_\_\_  
TITLE

# COI REQUIREMENTS

CERTIFICATE HOLDER:

SC PORTS AUTHORITY  
ATTN: RISK MANAGEMENT  
200 Ports Authority Drive  
Mt. Pleasant, SC 29464

EMAIL CERTIFICATES TO: [ABR@SCSPA.com](mailto:ABR@SCSPA.com)

## SC PORTS AUTHORITY INSURANCE REQUIREMENTS

All Registrants shall provide the SCPA with a Certificate(s) of Insurance (COI) evidencing insurance covering their operations. The COI shall show limits of Commercial General Liability (BI & PD), Automobile Liability, other applicable liability policies, and S.C. Workers Compensation including USL&H/Jones Act coverage when appropriate.

### CERTIFICATE(S) OF INSURANCE AND COPIES OF POLICY ENDORSEMENTS ARE REQUIRED:

ALL LIABILITY POLICIES EXCEPT AUTO SHALL BE ENDORSED WITH COPIES PROVIDED AND AUTHORIZED WITH A REPRESENTATIVE'S SIGNATURE TO SPECIFY:

- (1) SCPA is an 'Additional Insured' on all liability policies except Auto as to operations on or adjacent to the SCPA's facilities';
- (2) The Registrant's coverage is 'primary and non-contributory' as respects liability arising from the Registrant's operations;
- (3) All Liability and Workers' Compensation policies have been amended by endorsement to Waive the Insurer's Right of Subrogation in favor of the SCPA;
- (4) All policies have been endorsed to provide the SCPA with a 10 day written notice, prior to any policy's cancellation or material change.

**NOTE:** COPIES OF THE POLICY ENDORSEMENTS MUST BE INCLUDED FOR A REGISTRATION TO BE VALID. *Insurers and coverage are subject to review by the SCPA.*

All Registrant's doing business with or conducting activities on SCPA property must register their vehicles and provide Auto Liability insurance.

If you have any questions contact Risk Management at 843-577-8176 or [ABR@scspa.com](mailto:ABR@scspa.com).



**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL INSURED – OWNERS, LESSEES OR  
CONTRACTORS – SCHEDULED PERSON OR  
ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

**SCHEDULE**

**Name of Person or Organization:**

**SC State Ports Authority**

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

**A. Section II – Who Is An Insured** is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of your ongoing operations performed for that insured.

**B.** With respect to the insurance afforded to these additional insureds, the following exclusion is added:

**2. Exclusions**

This insurance does not apply to "bodily injury" or "property damage" occurring after:

- (1) All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the site of the covered operations has been completed; or
- (2) That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

## WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

### SCHEDULE

Name Of Person Or Organization:

**SC State Ports Authority**

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph 8. **Transfer Of Rights Of Recovery Against Others To Us** of Section IV – Conditions:

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.

Sample

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **PRIMARY/NON-CONTRIBUTORY COVERAGE**

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE PART  
CONTRACTORS POLLUTION LIABILITY COVERAGE PART**

**PRIMARY/NON-CONTRIBUTORY** – If required by written contract or agreement, effected prior to the date your operations for that person or organization commenced and named below, such insurance as is afforded by this policy to any additional insureds under this policy shall be primary insurance, and any insurance or self-insurance maintained by such additional insured(s) shall not contribute to the insurance afforded to the named insured.

All other terms and conditions remain unchanged.

### **SCHEDULE**

Any person or organization that is:

1. An owner of real or personal property on which you are performing operations, but only at the specific written request by that person or organization to you, and only if:
  - a. That request is made prior to the date your operations for that person or organization commenced; and
  - b. A Certificate of Insurance evidencing that request has been issued by your authorized insurance agent or broker; or
2. A contractor on whose behalf you are performing operations, but only at the specific written request by that person or organization to you, and only if:
  - a. That request is made prior to the date your operations for that person or organization commenced; and
  - b. A Certificate of Insurance evidencing that request has been issued by your authorized insurance agent or broker.

**WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT**

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

Schedule

South Carolina Ports Authority

200 Ports Authority Drive

Mt. Pleasant, SC 29464

SAMPLE

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

All of the below information should be completed.

Endorsement  
Insured

Effective Policy No.

Endorsement No.  
Premium

Insurance Company

Countersigned by \_\_\_\_\_