



OIL INSURANCE LIMITED

FORM # 5

CERTIFICATE

The undersigned, an officer of _____
(the "Shareholder"), a shareholder of OIL INSURANCE LIMITED, a Bermuda company
(the "Company"), hereby authorizes _____ or failing him,
_____ or _____ to act as representatives of the
Shareholder at all Meetings of Shareholders of the Company and to exercise all powers
of the Shareholder as a shareholder of the Company at all such meetings.

Dated: _____

(Signature of Certifying Officer)

(Title of Certifying Officer)