

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/8/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

INSURER A COORTING COVERAGE ACCORTING MANUER A: INSURER B: INSURER B: INSURER C: INSURE	CERTIFICATE NUMBER: 100895914 S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW F ICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION STIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFOR CLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAV TYPE OF INSURANCE ADDL SUBR INSIR WYD POLICY NUMBER SENERAL LIABILITY Y Y	INSURE IN	INS ER A: ER B: ER C: ER C: ER F: EN ISSUED TO Y CONTRACT THE POLICIE REDUCED BY	THE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS	REVISION NUMBER: D NAMED ABOVE FOR TO DOCUMENT WITH RESPECT HEREIN IS SUBJECT TO	HE POLICY PE
INSURER A : INSURER A : INSURER B : INSURER B : INSURER B : INSURER C : INSUR	CERTIFICATE NUMBER: 100895914 S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW F ICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION STIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFOR CLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAV TYPE OF INSURANCE ADDL SUBR INSIR WYD POLICY NUMBER SENERAL LIABILITY Y Y	INSURE IN	INS ER A: ER B: ER C: ER C: ER F: EN ISSUED TO Y CONTRACT THE POLICIE REDUCED BY	THE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS	REVISION NUMBER: D NAMED ABOVE FOR TO DOCUMENT WITH RESPECT HEREIN IS SUBJECT TO	HE POLICY PE
ADDRESS: INSURER S: INSURER A: INSURER A: INSURER B: INSURER B: INSURER C: IN	CERTIFICATE NUMBER: 100895914 S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW F ICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION STIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFOR CLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAV TYPE OF INSURANCE ADDL SUBR INSIR WYD POLICY NUMBER SENERAL LIABILITY Y Y	INSURE IN	INS INS IR A: IR B: IR C: IR C: IR F: IR F: IN ISSUED TO Y CONTRACT THE POLICIE REDUCED BY	THE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS	REVISION NUMBER: ED NAMED ABOVE FOR TO DOCUMENT WITH RESPECT TO	HE POLICY PE
INSURER A: INSURER B: INSURER C: INSURE C: INSURER	CERTIFICATE NUMBER: 100895914 S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW F ICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION STIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFOR CLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAV TYPE OF INSURANCE ADDL SUBR INSIR WYD POLICY NUMBER SENERAL LIABILITY Y Y	INSURE IN	ERA: ERB: ERC: ERD: ERF: OY CONTRACT THE POLICIE REDUCED BY	THE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS	REVISION NUMBER: ED NAMED ABOVE FOR TO DOCUMENT WITH RESPECT TO	HE POLICY PE
ACCOR-I INSURER B: INSURER C: INS	CERTIFICATE NUMBER: 100895914 S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW F ICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION STIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFOR CLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAV TYPE OF INSURANCE ADDL SUBR INSIR WYD POLICY NUMBER SENERAL LIABILITY Y Y	INSURE IN	ERB: ERC: ERD: ERF: ON ISSUED TO Y CONTRACT THE POLICIE REDUCED BY	THE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS	ED NAMED ABOVE FOR TO DOCUMENT WITH RESPE D HEREIN IS SUBJECT TO	CT TO WHICH
INSURER 0: INSURER 0: INSURER 0: INSURER 1: INSURER 1: INSURER 1: INSURER 2: INSURER 5: INSURER 5: INSURER 6: INSURER 7: INSURER 7: INSURER 7: INSURER 6: INSURE 6: INSURER 6: INSURE 6: INSURER 6: INSURER 6: INSURER 6: INSURER 6: INSURER 6: INSURE 6: INSURER 6: INSURER 6: INSURER 6: INSURER 6: INSURER 6: INS	CERTIFICATE NUMBER: 100895914 S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW F ICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION STIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFOR CLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAV TYPE OF INSURANCE ADDL SUBR INSIR WYD POLICY NUMBER SENERAL LIABILITY Y Y	INSURE IN	ER C: ER D: ER E: ER F: EN ISSUED TO Y CONTRACT THE POLICIE: REDUCED BY	THE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS	ED NAMED ABOVE FOR TO DOCUMENT WITH RESPE D HEREIN IS SUBJECT TO	CT TO WHICH
INSURER D: INSURER T: INSURE T: INSURER T: INSURE TO THE INSURED AMES EN INSURED AND COHEN IN THE POLICY POLICY FOR THE POLICY FOR THE POLICY POLICY FOR THE POLICY FOR T	S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW FIGURED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF SUCH POLICIES. LIMITS SHOWN MAY HAVE TYPE OF INSURANCE ADDLISUSED INSURANCE ADDLISUSED POLICY NUMBER SENERAL LIABILITY SENERAL LIABILITY Y Y Y INSURANCE POLICY NUMBER Y Y Y	INSURE IN	ERD: ERE: ERF: EN ISSUED TO Y CONTRACT THE POLICIE REDUCED BY	THE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS	ED NAMED ABOVE FOR TO DOCUMENT WITH RESPE D HEREIN IS SUBJECT TO	CT TO WHICH
INSURER E: INSURER F: DVERAGES CERTIFICATE NUMBER: 1008959145 REVISION NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PENDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH EXPERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TEXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. TYPE OF INSURANCE GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY AV Walver of subrogation GENTA AGGREGATE LIMIT APPLIES PER: POLICY N PERMISSE GENERAL GENERAL LIABILITY ANY AUTO ALL OWNED AND ALL OWNED BOOLLY HILL OWNED ALL OWNE	S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW FIGURED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF SUCH POLICIES. LIMITS SHOWN MAY HAVE TYPE OF INSURANCE ADDLISUSED INSURANCE ADDLISUSED POLICY NUMBER SENERAL LIABILITY SENERAL LIABILITY Y Y Y INSURANCE POLICY NUMBER Y Y Y	INSURE INSURE IS HAVE BEE ON OF AN' RDED BY VE BEEN F	ERE: ERF: EN ISSUED TO Y CONTRACT THE POLICIE: REDUCED BY	THE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS	ED NAMED ABOVE FOR TO DOCUMENT WITH RESPE D HEREIN IS SUBJECT TO	CT TO WHICH
DVERAGES CERTIFICATE NUMBER: 1008959145 REVISION NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PENDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH PRETIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TEXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. TYPE OF INSURANCE GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY ANY AUTO ALLOWNED ALTOWORD X SCHEDULED AUTOS AUTOMOBILE LIMIT APPLIES PER: POLICY X PRO AUTOMOBILE LIABILITY ANY AUTO ALLOWNED ALLOWNED AUTOS AUTOMOBILE LIABILITY ANY AUTO ALLOWNED AUTOS AUTOMOBILE LIABILITY ANY AUTO ALLOWNED AUTOS AUTOMOBILE LIABILITY ANY AUTO ALLOWNED AUTOS AUTOMOBILE LIABILITY AUTOMO	S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW FIGURED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF SUCH POLICIES. LIMITS SHOWN MAY HAVE TYPE OF INSURANCE ADDLISUSED INSURANCE ADDLISUSED POLICY NUMBER SENERAL LIABILITY SENERAL LIABILITY Y Y Y INSURANCE POLICY NUMBER Y Y Y	INSURE HAVE BEE ON OF AN' RDED BY VE BEEN F	ERF: EN ISSUED TO Y CONTRACT THE POLICIE: REDUCED BY	THE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS	ED NAMED ABOVE FOR TO DOCUMENT WITH RESPE D HEREIN IS SUBJECT TO	CT TO WHICH
DVERAGES CERTIFICATE NUMBER: 1008959145 REVISION NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PENDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH PERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TEXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. TYPE OF INSURANCE GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY ACCOMMENCIAL GENERAL LIABILITY ANY AUTO ALL OWNED ALTOWORLE LIABILITY ANY AUTO ALL OWNED AUTONOBILE LIABILITY AUTONOBILE LIABILITY ANY AUTO ALL OWNED AUTONOBILE LIABILITY AUTONOBILE L	S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW FIGURED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF SUCH POLICIES. LIMITS SHOWN MAY HAVE TYPE OF INSURANCE ADDLISUSED INSURANCE ADDLISUSED POLICY NUMBER SENERAL LIABILITY SENERAL LIABILITY Y Y Y INSURANCE POLICY NUMBER Y Y Y	INSURE HAVE BEE ON OF AN' RDED BY VE BEEN F	ERF: EN ISSUED TO Y CONTRACT THE POLICIE: REDUCED BY	THE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS	ED NAMED ABOVE FOR TO DOCUMENT WITH RESPE D HEREIN IS SUBJECT TO	CT TO WHICH
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PROICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TEXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. TYPE OF INSURANCE	S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW FIGURED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF SUCH POLICIES. LIMITS SHOWN MAY HAVE TYPE OF INSURANCE ADDLISUSED INSURANCE ADDLISUSED POLICY NUMBER SENERAL LIABILITY SENERAL LIABILITY Y Y Y INSURANCE POLICY NUMBER Y Y Y	HAVE BEE ON OF AN' RDED BY VE BEEN F	EN ISSUED TO Y CONTRACT THE POLICIES REDUCED BY	THE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS	ED NAMED ABOVE FOR TO DOCUMENT WITH RESPE D HEREIN IS SUBJECT TO	CT TO WHICH
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY ENDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TEXT OF THE POLICY ENDICATED. NOTWITHSTANDING ANY CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. RECEIVED TO THE INSURED IN THE INSURED BY THE POLICY BY PAID CLAIMS. RECEIVED TO ALL THE TEXT OF THE POLICY BY PAID CLAIMS. RECEIVED TO THE INSURED IN THE INSURED BY THE POLICY BY PAID CLAIMS. RECEIVED TO THE INSURED IN THE INSURED BY THE POLICY BY PAID CLAIMS. PURITY OF INSURANCE APPOINT IN THE INSURANCE AFFORDED BY THE POLICY BY PAID CLAIMS. POLICY STATE OF THE POLICY BY PAID CLAIMS. PROBLET TO ALL THE TEXT OF THE POLICY BY PAID CLAIMS. PROBLET TO THE INSURCE SOURCE STATE OF THE POLICY BY PAID CLAIMS. PROBLET TO THE INSURCE STATE OF THE POLICY BY PAID CLAIMS. PROBLET TO THE INSURCE STATE OF THE POLICY BY THE PO	S IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW FIGURED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF SUCH POLICIES. LIMITS SHOWN MAY HAVE TYPE OF INSURANCE ADDLISUSED INSURANCE ADDLISUSED POLICY NUMBER SENERAL LIABILITY SENERAL LIABILITY Y Y Y INSURANCE POLICY NUMBER Y Y Y	HAVE BEE ON OF AN' RDED BY VE BEEN F	Y CONTRACT THE POLICIES REDUCED BY	THE INSURE OR OTHER I S DESCRIBEI PAID CLAIMS	ED NAMED ABOVE FOR TO DOCUMENT WITH RESPE D HEREIN IS SUBJECT TO	CT TO WHICH
TYPE OF INSURANCE INSURANC	TYPE OF INSURANCE INSR WVD POLICY NUMBER SENERAL LIABILITY Y Y		(MM/DD/YYYY)	(MM/DD/YYYY)	1 11417	
X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X Contractual Liab X Waiver of subrogation GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PEC LOC AUTOMOBILE LIABILITY ANY AUTOS HIRED AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE POlicy Info POlicy Info POlicy Info POlicy Info POlicy Info PERSONAL & ADV INJURY \$ 1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: PODUCTS - COMPIOP AGG \$ 2,000,000 S COMBINED SINGLE LIMIT (Ea accident) S DODILY INJURY (Per person) \$ 1,000,000 BODILY INJURY (Per person) \$ 1,000,000 BODILY INJURY (Per accident) \$ 1,000,000 EXCESS LIAB CLAIMS-MADE POlicy Info PROPERTY DAMAGE POLICY INJURY (Per accident) \$ 1,000,000 S COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ 1,000,000 BODILY INJURY (Per accident) \$ 1,000,000 S COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ 1,000,000 EXCESS LIAB CLAIMS-MADE POlicy Info PROPERTY DAMAGE POLICY INJURY (Per accident) \$ 1,000,000 S COMPRESS COMPENSATION AND EMPLOYERS' LIABILITY N/A POlicy Info ELL EACH ACCIDENT \$ 1,000,000 ELL EACH ACCIDENT \$ 1,000,000 ELL DISEASE - POLICY LIMIT \$ 1,000,000 ELL DISEASE - POLICY LIMIT \$ 1,000,000 PERMISES (EA occurrence) \$ 1,000,000 PREMISES (EA occurrence) \$ 1,000,000 PERMISES (EA occurrence) \$ 1,00					LIMIT	S
POLICY INTO POLICY X PROJECT LOC AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS HIRED AUTOS AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION\$ 10,000 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY POLICY INTO POLICY INTO POPERATIONS below POLICY INTO POPERATIONS below POLICY INTO POLICY INTO POPERATIONS below POLICY INTO PERSONAL & ADV INJURY \$1,000,000 BEST S,000,000 PERSONAL & ADV INJURY \$1,000,000 BENEL AGREGATE S,000,000 PERSONAL & ADV INJURY \$1,000,000 SEMBLE EXPLOYERS' LIABILITY COMBINED SINGLE LIMIT (Ea accident) S 1,000,000 BODILY INJURY (Per person) S 1,000,000 BODILY INJURY (Per accident) S 2,000,000 PRODUCTS - COMP/OP AGG S,000,000 BODILY INJURY (Per accident) S 2,000,000 BODILY INJURY (Per accident) S 2,000,000 BODILY INJURY (Per accident) S 3,000,000 BODILY INJURY (Per accident) S 4,000,000 BEACH OCCURRENCE S,000,000 S 4,000,000 S 5,000,000 S 5,000,000 BEACH OCCURRENCE S,000,000 S 5,000,000 S 5,000,000 BEACH OCCURRENCE S,000,000 S 5,000,000 BEACH OCCURRENCE S,000,000 S 5,000,000 BEACH OCCURRENCE S,000,000 S 5,000,000 BEACH OCCURRENCE S,000,000 S 5,000,000 BEACH OCCURRENCE S,000,000 S 5,000,000 BEACH OCCURRENCE S,000,000 BEACH	X COMMERCIAL GENERAL LIABILITY					\$1,000,000
X Contractual Liab Waiver of subrogation GENTL AGGREGATE LIMIT APPLIES PER: POLICY X PRO- POLICY X PRO- POLICY X PRO- AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS A					PREMISES (Ea occurrence)	\$ 300,000
X Contractual Liab Waiver of subrogation GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- POLICY X PRO- POLICY X PRO- AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS HIRED AUTOS HIRED AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 10,000 POLICY INJURY (Per person) \$ EACH OCCURRENCE \$ 5,000,000 S POlicy Info POlicy Info Policy Info Policy Info Policy Info E.L. BASE - EA EMPLOYEE \$ I,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 CEL. DISEASE - POLICY LIMIT \$ 1,000,000 CENTRACL ADVINURY (Per person) \$ COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ COMBINED SINGLE LIMIT (Ea accident) \$ SOURCE ACCIDENT \$ TOTAL TORY LIMITS ER E.L. EACH ACCIDENT \$ E.L. DISEASE - POLICY LIMIT \$ If yes, describe under DESCRIPTION OF OPERATIONS below	CLAIMS-MADE X OCCUR Policy Info				MED EXP (Any one person)	\$ 5,000
GENERAL AGGREGATE \$ 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRODUCTS - COMP/OP AGG \$ 2,000,000 AUTOMOBILE LIABILITY ANY AUTO ALL OWNED X AUTOS HIRED AUTOS NON-OWNED AUTOS NON-OWNED AUTOS AUTOS AUTOS NON-OWNED AUTOS FOR accident) X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE POlicy Info Policy Info Policy Info GENERAL AGGREGATE \$ 2,000,000 \$ 2,000,000 \$ 2,000,000 \$ 2,000,000 BODILY INJURY (Per person) \$ 1,000,000 PROPERTY DAMAGE \$ 1,000,000 EXCESS LIAB CLAIMS-MADE Policy Info WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OTH-TORY LIMITS ER ELL EACH ACCIDENT \$ 1,000,000 ELL EACH ACCIDENT \$ 1,000,000 ELL DISEASE - POLICY LIMIT \$	X Contractual Liab				PERSONAL & ADV INJURY	\$ 1,000,000
POLICY X PRO-JECT LOC AUTOMOBILE LIABILITY ANY AUTO ANY AUTO ALL OWNED AUTOS AUTOS HIRED AUTOS HIRED AUTOS AUTOS AUTOS AUTOS NON-OWNED AUTOS Y AUTOS PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$ 5,000,000 \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yee, describe under DESCRIPTION OF OPERATIONS below S	Waiver of subrogation				GENERAL AGGREGATE	\$ 2,000,000
AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 AGGREGATE \$5,000,000 S WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below ANY ANY PROPRIETOR PARTIONS below AUTOS BODILY INJURY (Per person) \$ BODILY INJURY (Per person) \$ EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 S WC STATU- TORY LIMITS ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - BA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$					PRODUCTS - COMP/OP AGG	
ANY AUTO ALL OWNED AUTOS PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 AGGREGATE \$5,000,000 \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below AUTOS PROPERTY DAMAGE AUTOS \$ POlicy Info Policy Info BODILY INJURY (Per person) BODILY INJURY (Per person) AUTOS PROPERTY DAMAGE S EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 S WC STATU- TORY LIMITS OTH- TORY LIMITS						
ALL OWNED AUTOS HIRED AUTOS NON-OWNED AUTOS WORKERS CIAIMS— WORKERS COMPENSATION AND EMPLOYERS* LIABILITY ANY PROPERIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below BODILY INJURY (Per accident) \$ BODILY INJURY (Per accident) \$ EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$ WC STATU- TORY LIMITS OTH- TORY LIMITS ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	ANN ALTO					
AUTOS AUTOS NON-OWNED AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 10,000 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below PROPERTY DAMAGE \$ \$ EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 WC STATU- TORY LIMITS OTH- TORY LIMITS ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - BA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	ALL OWNED Y SCHEDULED					
HIRED AUTOS AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 10,000 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Policy Info EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 S WC STATU- TORY LIMITS OTH- TORY LIMITS ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	AUTOS AUTOS NON-OWNED					
X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 10,000 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Policy Info EACH OCCURRENCE \$ 5,000,000 S WC STATU- TORY LIMITS OTH- TORY LIMITS OTH- TORY LIMITS OFFI- E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	HIRED AUTOS AUTOS				(Per accident)	
EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 10,000 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Policy Info ELC. DISEASE - POLICY LIMIT \$ ELC. DISEASE - POLICY LIMIT \$	V UMPDELLALIAD V		-			
DED X RETENTION \$ 10,000 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Policy Info \$ WC STATU- OTH- TORY LIMITS ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	CCCOR					
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below WC STATU- TORY LIMITS ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	V				AGGREGATE	
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below AND EMPLOYERS' LIABILITY	112121110114 10,000				WC STATUL OTH	
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below N / A Policy Info E.L. EACH ACCIDENT \$ 1,000,000	AND EMPLOYEDS! LIABILITY				TORY LIMITS ER	
(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	ANY PROPRIETOR/PARTNER/EXECUTIVE Dolicy Info				E.L. EACH ACCIDENT	\$ 1,000,000
DÉSCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT \$	Mandatory in NH)				E.L. DISEASE - EA EMPLOYEE	\$
Disability Statutory	PES, describe under DESCRIPTION OF OPERATIONS below				E.L. DISEASE - POLICY LIMIT	\$
	Jisability					Statutory
SCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Policies shown are subject to terms, conditions, exclusions, sublimits and deductibles not listed on this certificate. We recommend that requests for policies shown are subject to terms, conditions, exclusions, sublimits and deductibles not listed on this certificate.						
				ent Corp.		
dditional Insured(s) as REQUIRED BY WRITTEN CONTRACT: Accord Contracting and Management Corp.	TIFICATE HOLDER	CANO	CANCELLATION			
	Accord Contracting and Management Corp 132 West 31st Street New York NY 10001	THE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEF THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED ACCORDANCE WITH THE POLICY PROVISIONS.			