Client#: 185753 EASTRIV2

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/05/2024

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.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

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PRODUCER	CONTACT Philip Goodman				
Edgewood Partners Ins. Center	PHONE (A/C, No, Ext): 201 356-3400 FAX (A/C, No):				
499 Washington Blvd	E-MAIL ADDRESS: phil.goodman@epicbrokers.com				
Suite 810	INSURER(S) AFFORDING COVERAGE NAIC #				
Jersey City, NJ 07310	INSURER A: The Insurance Co of Greater New York 22195				
INSURED	INSURER B : Federal Insurance Company 20281				
East River Housing Corp.	INSURER C : State Compensation Ins. Fund 35076				
453 FDR Drive - Rear Lobby Level	INSURER D: The Hanover Insurance Company 22292				
New York, NY 10002	INSURER E: Trumbull Insurance Company 27120				
	INSURER F:				

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
Α	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR		1131M44042	06/01/2024	06/01/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000 \$100,000
						MED EXP (Any one person)	\$5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PERSONAL & ADV INJURY GENERAL AGGREGATE	\$1,000,000 \$2,000,000
	X POLICY PRO- LOC					PRODUCTS - COMP/OP AGG	\$2,000,000
E	OTHER: AUTOMOBILE LIABILITY		40UEND00055	42/20/2022	42/20/2024	COMBINED SINGLE LIMIT	\$ 4,000,000
	X ANY AUTO		10UENDO8955	12/30/2023	12/30/2024	(Ea accident) BODILY INJURY (Per person)	\$1,000,000 \$
	OWNED SCHEDULED AUTOS ONLY					BODILY INJURY (Per accident)	\$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
В	X UMBRELLA LIAB X OCCUR		G74614620001	06/01/2024	06/01/2025	EACH OCCURRENCE	\$10,000,000
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$10,000,000
С	DED X RETENTION \$10,000 WORKERS COMPENSATION		12347654	01/01/2024	01/01/2025	X PER OTH-	\$
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A	12547054	01/01/2024	01/01/2025	E.L. EACH ACCIDENT	\$1,000,000
	(Mandatory in NH) If yes, describe under					E.L. DISEASE - EA EMPLOYEE	, ,
D	DESCRIPTION OF OPERATIONS below Employee Theft		BDYH27538004	06/01/2024	06/01/2027	7,500,000	\$1,000,000
ן כ	Linployee fileit		DD 11127 33000 4	00/01/2024	00/01/2021	Ded 10,000	
	PRINTION OF OPERATIONS / LOCATIONS / VEHIC						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Additional UMB Policies

XL Insurance America Inc Policy # PCI000000101 Limit \$15,000,000 Fireman's Fund Ins Co Policy USL014725233 Limit \$25,000,000 Westchester Fire Ins Co Policy # G74452590001 Limit 25,000,000 (See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION
Evidence of Insurance	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE
	pome / k. M. arani

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DESCRIPTIONS (Continued from Page 1)						
Liberty Ins Underwriters Inc Policy # 100035773005 Limit \$10,000,000 Great American Assurance Co Policy # EXC5126060 Limit \$15,000,000						