

AMERRITT

CERTIFICATE OF LIABILITY INSURANCE

ACORD®

DATE (MM/DD/YYYY) 04/10/2017

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 rights to the certificate holder in lieu of such endorsement(s).

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PRODUCER	CONTACT Amy Merritt						
Hickok & Boardman, Inc. 346 Shelburne Rd	PHONE (A/C, No, Ext): (802) 383-1657 FAX (A/C, No): (802)	658-0541					
Burlington, VT 05401	E-MAIL ADDRESS: amerritt@hbinsurance.com						
	INSURER(S) AFFORDING COVERAGE	NAIC #					
	INSURER A: Travelers Indemnity Co of America	25666					
INSURED	INSURER B: Travelers Indemnity Co of Connecticut	25682					
Simon Pearce (US), Inc.	INSURER C: Travelers Property Casualty Co of America						
109 Park Road	INSURER D:						
Windsor, VT 05089	INSURER E :						
	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.

	XCLUSIONS AND CONDITIONS OF SUCH F							
INSR LTR	TYPE OF INSURANCE	ADDL SUE	BR POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	'S	
Α	X COMMERCIAL GENERAL LIABILITY		_		,	EACH OCCURRENCE	\$ 1,000	,000
	CLAIMS-MADE X OCCUR		Y-660-7F897896-TIA-17	04/01/2017	04/01/2018	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300	,000
						MED EXP (Any one person)	10,	,000
						PERSONAL & ADV INJURY	1,000	,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 2,000	,000
	POLICY PRO- X LOC					PRODUCTS - COMP/OP AGG	\$ 2,000	,000
	OTHER:						\$	
В	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	1,000	,000
	X ANY AUTO		BA-7F986623-17-CAG 04/01/2017 0		04/01/2018	BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS ONLY					BODILY INJURY (Per accident)	\$	
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$	
							\$	
С	X UMBRELLA LIAB X OCCUR			P-7F306591-TIL-17 04/01/2017 04	04/01/2018	EACH OCCURRENCE	\$ 10,000	
	EXCESS LIAB CLAIMS-MADE		YSM-CUP-7F306591-TIL-17			AGGREGATE	\$ 10,000	,000
	DED X RETENTION \$ 10,000						\$	
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					X PER OTH- STATUTE ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			04/01/2018	E.L. EACH ACCIDENT	Ф	,000	
						E.L. DISEASE - EA EMPLOYEE	Φ .	,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 500	,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Patricia Pearce is an excluded officer.

Named Insured: Simon Pearce (US), Inc. Simon Pearce (MD), Inc. Simon & Patricia Pearce Pearce Family Partnership, LP SEE ATTACHED ACORD 101

CERTIFICATE HOLDER _____CANCELLATION

City of Portland City Manager's Office 389 Congress Street, Room 208 Portland, ME 04101 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

any New A

LOC #: 0



ADDITIONAL REMARKS SCHEDULE

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nickok & Boardman, inc.		NAMED INSURED Simon Pearce (US), Inc. 109 Park Road Windsor, VT 05089	
SEE PAGE 1		Windsor'	
CARRIER	NAIC CODE		
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles:

Pearce Family Limited Partnership II, LP

Adam Pearce Shareholder Trust

Andrew Pearce Shareholder Trust

Kevin Pearce Shareholder Trust

Simon Pearce Family Trust

Pia Pearce Family Trust

Pearce Real Estate Holdings, LLC

Simon Pearce Quechee Main Street Mill, LLC

Simon Pearce Quechee Main Street Apartments, LLC

Simon Pearce Park Road, LLC

Simon Pearce Windsor Apartments, LLC

Proof of liability insurance for the Portland store: 111 Commercial Street, Portland, ME