



CERTIFICATE OF LIABILITY INSURANCE

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.

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.

Table with 2 main sections: PRODUCER (Hickok & Boardman, Inc.) and INSURED (Simon Pearce (US), Inc.). Includes contact information for Amy Merritt and a list of insurers: Travelers Indemnity Co of America, Travelers Indemnity Co of Connecticut, and Travelers Property Casualty Co of America.

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.

Main coverage table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF, POLICY EXP, LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liability, and Workers Compensation.

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

Table with 2 columns: CERTIFICATE HOLDER (City of Portland) and CANCELLATION (Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions. Includes signature of Amy Merritt).



## ADDITIONAL REMARKS SCHEDULE

AGENCY <b>Hickok &amp; Boardman, Inc.</b>		NAMED INSURED <b>Simon Pearce (US), Inc.</b>	
POLICY NUMBER <b>SEE PAGE 1</b>		<b>109 Park Road</b>	
CARRIER <b>SEE PAGE 1</b>		NAIC CODE <b>SEE P 1</b>	<b>Windsor, VT 05089</b>
		EFFECTIVE DATE: <b>SEE PAGE 1</b>	

## 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