	C	ORD CERTIFIC	#: 7948 CATE OF 1 1/	NDII ITV I	PORT NCLIDAN		DATE (MM/DD/YYYY)	
			CATE OF LIA				10/23/06	
PRODUCER HRH Northern New England 959 Congress St Portland, ME 04102-2175 207 553-2131 INSURED Portland Regency Inc. d/b/a Portland 20 Milk Street Portland, ME 04101					THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
					INSURERS AFFORDING COVERAGE			
					INSURER A: Valley Forge Insurance Company			
					INSURER C: Maine Employers Mutual Insurance Com			
					INSURER E:			
					TI- AN	Y REC	GES LICIES OF INSURANCE LISTED BELO QUIREMENT, TERM OR CONDITION (RTAIN, THE INSURANCE AFFORDED S. AGGREGATE LIMITS SHOWN MAY	OF ANY CONTRACT OR OTHER BY THE POLICIES DESCRIBED
R	ADD'L NSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY	E POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS		
`	.,,,,,,,,	GENERAL LIABILITY	TCP2091642136	10/22/06	10/22/07	EACH OCCURRENCE	\$1,000,000	
	Ì	X COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000	
		CLAIMS MADE X OCCUR					\$5,000	
	[PERSONAL & ADV INJURY	\$1,000,000	
						GENERAL AGGREGATE	\$2,000,000	
		GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- JECT LOC				PRODUCTS - COMP/OP AGG	\$2,000,000	
В		AUTOMOBILE LIABILITY ANY AUTO	BUA2091642184	10/22/06	10/22/07	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000	
		ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	\$	
		X HIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$	
						PROPERTY DAMAGE (Per accident)	\$	
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
		ANY AUTO				OTHER THAN AUTO ONLY: AGG	\$	
		EXCESS/UMBRELLA LIABILITY	CUA2090859333	10/22/06	10/22/07	EACH OCCURRENCE	\$15,000,000	
		X OCCUR CLAIMS MADE	G0A2030033333	10/22/00	10/22/01	AGGREGATE	\$15,000,000 \$	
		DEDUCTIBLE			'		\$	
		X RETENTION \$ 10000	1810049275	01/14/06	01/14/07	X WC STATU- OTH- TORY LIMITS FR	\$	
		KERS COMPENSATION AND LOYERS' LIABILITY	1010043273	01/14/00	01/14/0/	E.L. EACH ACCIDENT	\$500,000	
		PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOYEE		
	If yes	s, describe under CIAL PROVISIONS below				E.L. DISEASE - POLICY LIMIT	\$ 500,000	
	ОТН							
	00:55	ON OF OPENATIONS // OCCUPANT // OCCUPANT	OLES (EVOLUSIONS APPENDIX	DODGEMENT / CDCO(A)	PROVISIONS			
		ION OF OPERATIONS / LOCATIONS / VEHI f Insurance regarding the sig			PROVISIONS			
	RTIFI	CATE HOLDER		CANCELL	ATION			
CERTIFICATE HOLDER					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION			
The City Of Portland 389 Congress Street Portland, ME 04101				DATE THERE	DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL30 DAYS WRITTE NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR			
					REPRESENTATIVES. AUTHORIZED REPRESENTATIVE			

RJS

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.