

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/6/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THI 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), AUTHORIZEI REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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)

| the state of the s | | | | |
|--|---|--------|--|--|
| PRODUCER | CONTACT Hope Cote | | | |
| Cross Insurance-Portland 2331 Congress Street | PHONE (A/C, No, Ext): (207) 780-1677 E-MAIL ADDRESS: hcote@crossagency.com | 377 | | |
| | ADDRESS: NCO Cett Crossagency.com | | | |
| Dombland | INSURER(S) AFFORDING COVERAGE | NAIC # | | |
| Portland ME 04102 | INSURER A: Travelers Property Casualty 256 | 674 | | |
| INSURED | INSURER B :Charter Oak Fire Ins Company | 013 | | |
| Unified Parking Partners Maine & NH, LLC | INSURER C:Standard Fire Ins Co | | | |
| 496 Congress Street | INSURER D : | 070 | | |
| Suite 2B | | | | |
| Portland ME 04101 | INSURER E : | | | |
| COVERAGES CERTIFICATE NUMBER CELEBRATIONS | INSURER F: | | | |

CERTIFICATE NUMBER:CL1541035228 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOL INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THE 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 | | SUBR | | POLICY EFF (MM/DD/YYYY) | POLICY EXP | LIMITS | | | | | | | | | | | | |
|-------------|--|-----------|------------------|--------------|----------------------------|------------|---|--|----------|--|--|--|---|--|--------------|-----------|-----------|-------------|--|
| A | X COMMERCIAL GENERAL LIABILITY | | | | 4/16/2015 | | EACH OCCURRENCE DAMAGE TO RENTED | \$ 1,000,00 \$ 100,00 | | | | | | | | | | | |
| | CLAIMS-MADE X OCCUR | | | 660-7F137084 | 4/16/2015 | 4/16/2016 | PERSONAL & ADV INJURY | \$ 5,0 \$ 1,000,0 \$ 10,000,0 | | | | | | | | | | | |
| | GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO- JECT LOC | | | | | - | PRODUCTS - COMP/OP AGG | 2,000,0 | | | | | | | | | | | |
| В | AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED SCHEDULED | NON-OWNED | | | | | | COMBINED SINGLE LIMIT (Ea accident) SODILY INJURY (Per person) | 1,000,00 | | | | | | | | | | |
| | AUTOS AUTOS NON-OWNED AUTOS SARAGE | | UTOS ON-OWNED | | BA-7F137858 | 4/16/2015 | 4/16/2016 | BODILY INJURY (Per accident) S PROPERTY DAMAGE (Per accident) | | | | | | | | | | | |
| 7 | X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE | | | | | | Uninsured motorist combined SEACH OCCURRENCE S | 5,000,0 | | | | | | | | | | | |
| A | DED X RETENTION\$ 0 | | | | | | | | | | | | 0 | | CUP-7F783844 | 4/16/2015 | 4/16/2016 | AGGREGATE S | |
| С | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | N/A | | UB-7F137140 | 4/16/2015 | 4/16/2016 | X WC STATU- TORY LIMITS OTH- E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ | 1,000,00 | | | | | | | | | | | |
| В | Garagekeepers Legal Liab. | | | BA-7F137858 | 4/16/2015 | 4/16/2016 | Each Location Comp & Coll Ded. each | \$1,000,00 \$1,000,00 \$1,00 | | | | | | | | | | | |

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Dan McNutt is excluded officer under workers' compensation. Certificate Holder is added as an Additional Insured under the Commercial General Liability policy only.

| CERTIFICATE HOLDER | CANCELLATION |
|--|--|
| City of Portland, Maine 389 Congress Street | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
| Portland, ME 04101 | Hope Cote/HAC Hape A. C. Le |

ACORD 25 (2010/05)