

CERTIFICATE OF LIABILITY INSURANCE

DATE (MWOD/YYYY) 1/15/2014

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(les) 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).

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PRO	DUCER			CONTA	CT Diane	Christy,	CISR, ACSR			
Cross Insurance-Portland				PHONE (AC. No. Ext): (207) 780-1677 FAX (AC. No. Ext): (207) 780-6377						
23.	31 Congress Street			E-MAIL ADDRE	eg dohris	ty@crossa	gency.com			
							RDING COVERAGE		NAIC #	
Portland ME 04102					INSURERA Massachusetts Bay Ins Co				22306	
INSURED				INSURER B Maine Employers Mutual Ins Co					11149	
Inn at St John Corp.					INSURER C:					
PO Box 463					INSURER D :					
					INSURER E :					
Portland ME 04112					INSURER F:					
CO	VERAGES CER	TIFICA	TE NUMBER:CL1411500				REVISION NUMBER:		<u> </u>	
C	HIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY REERTIFICATE MAY BE ISSUED OR MAY KCLUSIONS AND CONDITIONS OF SUCH	EQUIREN PERTAII	MENT, TERM OR CONDITION N. THE INSURANCE AFFORDS	OF AN FD RY	Y CONTRACT	OR OTHER I	DOCUMENT WITH RESPE	^T T^	SALICH TING	
NSR LTR	TYPE OF INSURANCE	ADDLISU INSR I W	BRI -			POLICY EXP	LIMIT	· .	* 	
	GENERAL LIABILITY		- Salet Hombert			[[MHQCJCJTTTT]	EACH OCCURRENCE	<u> </u>	1,000,000	
	X COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED	5	300,000	
A	CLAIMS-MADE X OCCUR	x	ODP9079114-02		5/16/2013	5/16/2014	PREMISES (Ea occurrence) MED EXP (Any one person)	3	5,000	
							PERSONAL & ADV INJURY	s	1,000,000	
							GENERAL AGGREGATE	3	2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER						PRODUCTS - COMP/OP AGG	s	2,000,000	
	X POLICY PRO-				1	ļ	THOSOUTH TOP AGG	\$	270007000	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT	•		
	ANY AUTO						(Ea accident) BODILY INJURY (Per person)	3		
	ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	 -	
	HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$	_	
							11 00 0000001111	\$		
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE			:		l	AGGREGATE	s		
	DED RETENTIONS				-			s		
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	N/A		i	5/16/2013	5/16/2014	X WC STATU- TORY LIMITS OTH- ER	-		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?						E.L. EACH ACCIDENT	3	500,000	
	(Mandatory in NH)		1810068850				E.L. DISEASE - EA EMPLOYEE	3	500,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	500,000	
		1 1								
		1								
DES(Ref	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (Alta	ch ACORD 101, Additional Remarks	Schedule	, if more space i	s required)				
Add	er to policy for exclusion litional Insured with respo	et to	Commercial Coneral	Clai List	provisio hilitu on	ns. Cert	ificate Holder i	an		
			COMMOTOTAL CHINGLAI	. 41.44	Dility On	-y-				
CEF	RTIFICATE HOLDER		· · · · · · · · · · · · · · · · · · ·	CANO	ELLATION					
			-							
City of Portland					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
389 Congress Street										
Portland, ME 04101					AUTHORIZED REPRESENTATIVE					

ACORD 25 (2010/05)

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D Christy, CISR, ACSR Dione m. Christy