OP ID: ND

ACORD.

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/24/2025

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).

PRODUCER	410-561-8280	CONTACT Neal Donovan	CONTACT Neal Donovan				
Gorges & Co., Inc. 2345 York Road		PHONE (A/C, No, Ext): 410-561-8280	FAX (A/C, No): 410-56	1-9728			
Timonium, MD 21093-2217		E-MAIL ADDRESS: neald@gorgesco.com	E-MAIL ADDRESS: neald@gorgesco.com				
Jack Millard/John Mutscheller		INSURER(S) AFFORDING COV	INSURER(S) AFFORDING COVERAGE				
		INSURER A: HDI Global Specialty SE					
INSURED		INSURER B: Travelers Indemnity Co.of	INSURER B : Travelers Indemnity Co.of Amer				
Rockland Run Condominium c/o Metropolis Condo Mgmt.		INSURER C: Carolina Casualty Insuran					
4307 Gallatin Street Hyattsville, MD 20781		INSURER D : U.S. Liability Ins. Co.	INSURER D : U.S. Liability Ins. Co.				
Tryattavine, IIID 20701		INSURER E :	INSURER E :				
		INSURER F:	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.

INSR LTR		TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
D	X	COMMERCIAL GENERAL LIABILITY				<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	EACH OCCURRENCE	\$ 1,000,000	
		CLAIMS-MADE X OCCUR	X		NPP1644856	04/13/2025	04/13/2026	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000	
Α	X	D&O			2091129	02/04/2025	02/04/2026	MED EXP (Any one person)	\$ 5,000	
								PERSONAL & ADV INJURY	\$ 1,000,000	
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000	
		POLICY PRO- JECT X LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000	
		OTHER:						D&O	\$ 1,000,000	
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$ N/A	
		ANY AUTO						BODILY INJURY (Per person)	\$ N/A	
		OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)		
		HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$ N/A	
									\$	
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$	
		EXCESS LIAB CLAIMS-M.	ADE					AGGREGATE	\$	
		DED RETENTION\$							\$	
	AND EMPLOYERS' LIABILITY  ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)				UB4K056677	03/14/2024	03/14/2025	X PER OTH- STATUTE OTH-		
			/N N/A					E.L. EACH ACCIDENT	\$ 100,000	
								E.L. DISEASE - EA EMPLOYEE	\$ 100,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$ 500,000	
Α	Pro	perty			GEP11506-25	04/13/2025	04/13/2026	Blkt Bldg	10,000,000	
В	Crin	ne	X		107852723	05/31/2023	05/31/2027	Crime	250,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)										

CERTIFICATE HOLDER CANCELLATION

Metropolis Condo Management 4307 Gallatin Street Hyattsville, MD 20781 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

Jack Millard/John Mutscheller

NOTEPAD

INSURED'S NAME Rockland Run Condominium c/o

ROCKL-1
OP ID: ND
Date 04/24/2025

Blanket Building Limit \$10,000,000 Deductible \$25,000 Condo master policy includes "walls-in" coverage but does not include additions or alterations made by the unit owner. Replacement cost coverage applies. Coinsurance N/A. Separation of insuredsincluded.

Employee Dishonesty limit \$250,000, managing agent included in coverage as additional insured.

Directors & Officers Liability \$1,000,000 each claim, \$1,000,000 aggregate.

241 Units.

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Location Schedule:

2 Long Stream Ct, Baltimore, MD 21209
4 Long Stream Ct, Baltimore, MD 21209
6 Long Stream Ct, Baltimore, MD 21209
8 Long Stream Ct, Baltimore, MD 21209
10 Long Stream Ct, Baltimore, MD 21209
1 Wind Blown Ct., Baltimore, MD 21209
3 Wind Blown Ct., Baltimore, MD 21209
5 Wind Blown Ct., Baltimore, MD 21209
7 Wind Blown Ct., Baltimore, MD 21209
9 Wind Blown Ct., Baltimore, MD 21209
11 Wind Blown Ct., Baltimore, MD 21209
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1800 Snow Meadow Lane, Baltimore, MD 21209
1802 Snow Meadow Lane, Baltimore, MD 21209
1804 Snow Meadow Lane, Baltimore, MD 21209
1801 Snow Meadow Lane, Baltimore, MD 21209
1803 Snow Meadow Lane, Baltimore, MD 21209
1805 Snow Meadow Lane, Baltimore, MD 21209
1807 Snow Meadow Lane, Baltimore, MD 21209
1809 Snow Meadow Lane, Baltimore, MD 21209
1811 Snow Meadow Lane, Baltimore, MD 21209
1811 Snow Meadow Lane, Baltimore, MD 21209
1 Sun Top Lane, Baltimore, MD 21209
5 Sun Top Lane, Baltimore, MD 21209
5 Sun Top Lane, Baltimore, MD 21209
7 Sun Top Lane, Baltimore, MD 21209
11 Sun Top Lane, Baltimore, MD 21209
13 Sun Top Lane, Baltimore, MD 21209
13 Sun Top Lane, Baltimore, MD 21209
15 Sun Top Lane, Baltimore, MD 21209
15 Sun Top Lane, Baltimore, MD 21209
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