



CERTIFICATE OF LIABILITY INSURANCE

ROCKL-1

OP ID: RG

DATE (MM/DD/YYYY)
10/28/2016

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 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 Gorges & Co., Inc. 2345 York Road Timonium, MD 21093-2217 Jack Millard/John Mutscheller	CONTACT NAME: Janet Fritz PHONE (A/C, No, Ext): 410-561-8280 E-MAIL ADDRESS: janetf@gorgesco.com	FAX (A/C, No): 410-561-9728	
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Rockland Run Condominium Association C/O Metropolis Condo Management Inc. 4307 Gallatin Street Hyattsville, MD 20781	INSURER A : The Phoenix Insurance Co		16691
	INSURER B : Great American Insurance Co.		
	INSURER C :		
	INSURER D :		
	INSURER E :		
	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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			6801E411845	02/04/2016	02/04/2017	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
A	<input checked="" type="checkbox"/> D&O GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			6801E411845	02/04/2016	02/04/2017	MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000 D&O \$ 1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			6801E411845	02/04/2016	02/04/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			UM3842794	02/04/2016	02/04/2017	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N	N / A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ N/A E.L. DISEASE - EA EMPLOYEE \$ N/A E.L. DISEASE - POLICY LIMIT \$ N/A
A	Property			6801E411845 SEE ATTACHED FR LOCATIONS	02/04/2016	02/04/2017	Building 20,315,174 Blanket

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Insurance Verification for Rockland Run Condominium
DEvans7107@aol.com

CERTIFICATE HOLDER**CANCELLATION**

Diana Evans 1805 Snow Meadow Ln. T1 Baltimore, MD 21209	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
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NOTEPADINSURED'S NAME **Rockland Run Condominium****ROCKL-1**
OP ID: RGPAGE 2
Date **10/28/2016**

Master Policy incl "walls-in" coverage & does not include any additions or alterations made by the condo owner. Replacment Cost Coverage applies. Property Deductible \$2,500. Employee Dishonesty \$1,000,000 limit.

Locations:

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

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

1 Sun Top Lane, Baltimore, MD 21209
3 Sun Top Lane, Baltimore, MD 21209
5 Sun Top Lane, Baltimore, MD 21209
7 Sun Top Lane, Baltimore, MD 21209
9 Sun Top Lane, Baltimore, MD 21209
11 Sun Top Lane, Baltimore, MD 21209
13 Sun Top Lane, Baltimore, MD 21209
15 Sun Top Lane, Baltimore, MD 21209