

ONASLEH



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/22/2024

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.

				h endorsement(s)	•						
rnational New England	PRODUCER License # 1780862					CONTACT NAME:					
HUB International New England 300 Ballardvale Street					PHONE (A/C, No, Ext): (978) 657-5100 FAX (A/C, No): (978) 988-0038						
on, MA 01887				E-MAIL ADDRESS:		((((((((((((((((((((
·					SURER(S) AFFOI	RDING COVERAGE		NAIC#			
					INSURER A : Philadelphia Indemnity Insurance Company						
INSURED					<u> </u>						
Robbins Brook Condominium Trust c/o BRIGS, LLC 185 Dudley Street											
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TYPE OF INSURANCE	ADDL S	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s				
COMMERCIAL GENERAL LIABILITY				(· · · · · · · · · · · · · · · · · · ·	EACH OCCURRENCE	\$	1,000,000			
CLAIMS-MADE X OCCUR			PHPK2617379	10/23/2023	10/23/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000			
						MED EXP (Any one person)	\$	5,000			
						PERSONAL & ADV INJURY	\$	1,000,000			
L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000			
POLICY PRO- LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000			
OTHER:						_	\$	1,000,000			
OMOBILE LIABILITY						(Ea accident)	\$	1,000,000			
ANY AUTO			PHPK2617379	10/23/2023	10/23/2024	BODILY INJURY (Per person)	\$				
OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	\$				
						PROPERTY DAMAGE (Per accident)	\$				
76166 6HZ1											
UMBRELLA LIAB OCCUR						EACH OCCURRENCE		25,000,000			
EXCESS LIAB CLAIMS-MADE			G74491583-G73870495	10/23/2023	10/23/2024		•				
DED RETENTION \$						AOGREGATE		25,000,000			
						PER OTH-	φ				
1 / N							•				
OFFICER/MEMBER EXCLUDED? N Mandatory in NH)							•				
							\$				
			DHDK2617370	10/23/2023	10/23/2024	E.L. DISEASE - POLICY LIMIT	\$	60,697,767			
ne			9983-3380			\$1,000,000/\$10K Ded		00,097,707			
ON OF OPERATIONS / LOCATIONS / VEHIC	LES (A	CORI	0 101, Additional Remarks Schedule tland Way, Preston Wav. Jo	e, may be attached if mor	re space is requir	red) Isdale Dr., Acton, MA 0172	20				
	C/O BRIGS, LLC 185 Dudley Street Boston, MA 02119 AGES CER COMMERCIAL GENERAL LIABILITY CLAIMS-MADE CLAIMS-MADE CLAIMS-MADE CLAIMS-MADE COMMERCIAL GENERAL LIABILITY CLAIMS-MADE CLAIMS-MADE COMMERCIAL GENERAL LIABILITY CLAIMS-MADE CLA	C/O BRIGS, LLC 185 Dudley Street Boston, MA 02119 AGES CERTIFIC TO CERTIFY THAT THE POLICIES OF TED. NOTWITHSTANDING ANY REQUIFICATE MAY BE ISSUED OR MAY PERTISIONS AND CONDITIONS OF SUCH POLICIES OF TYPE OF INSURANCE COMMERCIAL GENERAL LIABILITY CLAIMS-MADE L AGGREGATE LIMIT APPLIES PER: POLICY PRODICY PRODUCY OTHER: DMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY AUTOS ONLY WINDERLA LIAB CLAIMS-MADE CLAIMS-MADE CLAIMS-MADE CLAIMS-MADE CLAIMS-MADE CLAIMS-MADE CLAIMS-MADE CLAIMS-MADE CLAIMS-MADE MON-OWNED AUTOS ONLY WINDERLA LIAB CLAIMS-MADE CLAIMS-MADE DED RETENTION \$ CERS COMPENSATION MPLOYERS' LIABILITY ROPRIETOR/PARTNER/EXECUTIVE RETMEMBERS EXCLUDED? RETENTION OF OPERATIONS below mercial Property Re	C/O BRIGS, LLC 185 Dudley Street Boston, MA 02119 AGES CERTIFICATE BY THAT THE POLICIES OF INSTED. NOTWITHSTANDING ANY REQUIREMING ANY REQUIREMING AND CONDITIONS OF SUCH POLICIES. TYPE OF INSURANCE COMMERCIAL GENERAL LIABILITY CLAIMS-MADE L AGGREGATE LIMIT APPLIES PER: POLICY PRO- OTHER: DIMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY WINDS AUTOS ONLY WINDS AUTOS ONLY WINDS CERS COMPENSATION MPLOYERS' LIABILITY ROPRIETOR/PARTNER/EXECUTIVE RETEMEMBER EXCLUDED? RETENTION S CERS COMPENSATION MPLOYERS' LIABILITY ROPRIETOR/PARTNER/EXECUTIVE RETEMEMBER EXCLUDED? RETENTION OF OPERATIONS below Mercial Property Re RETENTION OF OPERATIONS below Mercial Property Re RETEMEMBER EXCLUDED? RET	Robbins Brook Condominium Trust c/o BRIGS, LLC 185 Dudley Street Boston, MA 02119 AGES CERTIFICATE NUMBER: B TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW H TED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION ICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORD SIGNS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE B TYPE OF INSURANCE TYPE OF INSURANCE COMMERCIAL GENERAL LIABILITY CLAIMS-MADE AUTOS OTHER: DOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY AUTOS ONLY WINDRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$ CERS COMPENSATION MPLOYER'S LIABILITY ROPRIETOR/PARTNER/EXECUTIVE REPMEMBER EXCLUDED? ROPETOR/PARTNER/EXECUTIVE RIPTION OF OPERATIONS below mercial Property Re PHPK2617379 9983-3380	Robbins Brook Condominium Trust c/o BRIGS, LLC 185 Dudley Street Boston, MA 02119 INSURER D : INSURER E : INSURER F :	Robbins Brook Condominium Trust c/o BRIGS, LLC 185 Dudley Street Boston, MA 02119 INSURER D : INSURER E : INSURER F :	C/O BRIGS, LLC 185 Dudley Street Boston, MA 02119 INSURER E: INSURER F: REVISION NUMBER: NOT CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE NOTWITHSTANDING ANY REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECTORS BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO SIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. TYPE OF INSURANCE ADDS SURE POLICY NUMBER POLICY NUMBER POLICY OF INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO SIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. TYPE OF INSURANCE INSURANCE INSURANCE ADDS SURE POLICY NUMBER POLICY NUMBER POLICY OF INSURANCE AND CONTRACT OR OTHER WITH RESPECTOR BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO SIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. TYPE OF INSURANCE INSURANCE INSURANCE POLICY NUMBER POLICY NUMBER POLICY OF INSURANCE INSURAN	Robbins Brook Condominium Trust c/o BRIGS, LLC 185 Dudley Street Boston, MA 02119 Insurer c :			

ACORD 25 (2016/03)

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AUTHORIZED REPRESENTATIVE

LOC #: 1



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

POLICY NUMBER		NAMED INSURED Robbins Brook Condominium Trust c/o BRIGS, LLC 185 Dudley Street Boston, MA 02119	
CARRIER	NAIC CODE		
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,	
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance	

Description of Operations/Locations/Vehicles:

Master Policy Deductible: \$25,000 per occurrence / \$25,000 per unit water and ice damming claims.

Effective 05/01/2022: : Master Policy Deductible: \$25,000 per occurrence / \$50,000 per unit all other perils claims.

Brigs, LLC is listed as an Additional Insured/Designated agent on the Associations crime/employee dishonesty coverage and additional insured as respects to the general liability.

The Master policy includes the following forms/endorsements: Earthquake \$10,000,000 w/ 5% Ded, Special Coverage, Equipment Breakdown, Building Ordinance or Law, Back up of Sewers and Drains and Seperation of Insureds (GL) Inflation Guard N/A. Wind/Hail is not excluded. Cancellation: Notice will be Delivered in Accordance with the policy provisions. 10 days notice for non-payment.