

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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).

certificate holder in lieu of such endorsement(s).	
PRODUCER	CONTACT NAME:
	PHONE
SAMPLE	[A/C, No, Ext): (A/C, No): E-MAIL ADDRESS:
	INSURER(S) AFFORDING COVERAGE NAIC #
	INSURER A:
INSURED	INSURER B:
Contractor	INSURER C:
Main Street	
Anytown, USA	INSURER D :
(000) 555-1212	INSURER E:
COVERAGES CERTIFICATE NUMBER:	INSURER F :
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 ADDLISUBR INSR WVD POLICY NUMBER	POLICY EFF POLICY EXP LIMITS
GENERAL LIABILITY	EACH OCCURRENCE \$ 1,000,000.00
COMMERCIAL GENERAL LIABILITY	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000.00
CLAIMS-MADE X OCCUR	MED EXP (Any one person) \$ 5,000.00
	PERSONAL & ADV INJURY \$ 1,000,000.00
	GENERAL AGGREGATE \$ 2,000,000.00
GEN'L AGGREGATE LIMIT APPLIES PER:	PRODUCTS - COMP/OP AGG \$ 1,000,000.00
POLICY PRO- LOC	\$
AUTOMOBILE LIABILITY	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000,00
X ANY AUTO	BODILY INJURY (Per person) \$ 1,000,000,00
ALL OWNED SCHEDULED	BODILY INJURY (Per accident) \$ 1,000,000,00
NON-OWNED	PROPERTY DAMAGE
HIRED AUTOS AUTOS	(Per accident)
UMBRELLA LIAB X OCCUR	
	EACH OCCURRENCE \$ 5,000,000.00 AGGREGATE \$ 5,000,000.00
TOLAIMO-MADE	
DED RETENTIONS \$ WORKERS COMPENSATION WC STATU- OTH- AND EMPLOYERS LIABILITY OTH- TORY LIMITS ER	
AND EMPLOYERS' LIABILITY	
ANY PROPRIETOR/PARTNER/EXECUTIVE N/A	E.L. EACH ACCIDENT \$ 500,000,000
(Mandatory in NH) If yes, describe under	E.L. DISEASE - EA EMPLOYEE \$ 500,000.00
DÉSCRIPTION OF OPERATIONS below	E.L. DISEASE - POLICY LIMIT \$ 500,000.00
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) The Marketplace, MMPO, LLC, BTMPM,LLC, COMIDA, Genesee Management, Inc., Wilmorite Inc., Wilmorite Management Group, LLC, Wilmorite Construction,	
LLC, Rochester Malls, LLC, Wilmorite Security, LLC and all its affiliates are included as additional insureds as their interests may appear on a primary	
non-contributory basis.	
CERTIFICATE HOLDER	CANCELLATION
ALIANI BANKAR PUR ARABIR BRANCHER BRANCH BRANCHER BRANCHER BRANCHER BRANCHER BRANCHER BRANCHER BRANCH	
Wilmorite Management Group, LLC SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN	
c/o The Marketplace Mall	ACCORDANCE WITH THE POLICY PROVISIONS.
1 Miracle Mile Drive	
	AUTHORIZED REPRESENTATIVE
Rochester, New York 14623	