

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

				ICATE OF LIA	DILI		UKANC		4/	10/2023	
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										ES	
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).											
						NAME: Carlo Ferrara PHONE (722) A(2, 8242)					
STREETSMART INSURANCE						(A/C, No, Ext): (752) 402-6545 (A/C, No):					
208 SOUTH STREET					ADDRESS: certificates@streetsmart.insurance						
					INSURER(S) AFFORDING COVERAGE					NAIC #	
FREEHOLD NJ 07728					INSURER A: MESA UNDERWRITERS SPECIALTY INS CO				36838		
INSURED					INSURER B: SCOTTSDALE INS CO					41297	
Monmouth Heights at Freehold Recreation Inc.					INSURER C :						
PO BOX 152					INSURER D :						
					INSURER E :						
ADELPHIA NJ 077100126					INSURER F :						
					REVISION NUMBER:						
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										D	
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		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 CCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000	
								MED EXP (Any one person)	\$	Excluded	
А				MP0031004006971		01/31/2023	01/31/2024	PERSONAL & ADV INJURY	\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000	
	PRO-									Included	
								PRODUCTS - COMP/OP AGG	\$ \$	Included	
	OTHER: AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	Ψ \$		
								(Ea accident)			
	ANY AUTO							,	\$		
	AUTOS ONLY AUTOS							· · · /	\$		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
									\$		
	X UMBRELLA LIAB							EACH OCCURRENCE	\$	2,000,000	
В	EXCESS LIAB CLAIMS-MADE			XBS0149646		01/31/2023	01/31/2024	AGGREGATE	\$	2,000,000	
	DED RETENTION \$								\$		
	WORKERS COMPENSATION							PER OTH- STATUTE ER			
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED?	N/A						E.L. DISEASE - EA EMPLOYEE			
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	φ		
	DESCRIPTION OF OPERATIONS DEIDW							E.L. DISEASE - POLICT LIMIT	Ф		
DEC		1.50	1000	D 404 Additional Develop C 1		he etteched V		uize d)	. <u> </u>		
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACOR	D 101, Additional Remarks Scheo	dule, may	be attached if m	ore space is req	uired)			
CERTIFICATE HOLDER CANCELLATION											
					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE						
Monmonth Hachte et Presheld Deere (* 14. * *						THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN					
Monmouth Heights at Freehold Recreation Association						ACCORDANCE WITH THE POLICY PROVISIONS.					
PO Box 152											
Γ U DUX 132						AUTHORIZED REPRESENTATIVE					
Adable NU 07708 Carlo Ferrara											
Adelphia NJ 07728						Coulos i oliteria.					

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