



HARTGAR-02

NVERDERESE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/13/2024

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. 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 Levitt-Fuirst Associates, LTD 520 White Plains Road 2nd Floor Tarrytown, NY 10591	CONTACT NAME: PHONE (A/C, No, Ext): (914) 457-4200	FAX (A/C, No): (914) 457-4200	
	E-MAIL ADDRESS: info@levittfuirst.com		
INSURER(S) AFFORDING COVERAGE		NAIC #	
INSURED Hartsdale Gardens Owners Corp c/o Robert Orlofsky Realty Inc 7 Bryant Gardens - Suite 1C White Plains, NY 10605	INSURER A : Insurance Company of Greater New York		22195
	INSURER B : XL Insurance America		24554
	INSURER C : Travelers Casualty and Surety Company of America		31194
	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	X COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			6131M694966	3/1/2024	3/1/2025	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 1,000,000
								\$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			6131M694966	3/1/2024	3/1/2025	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
							\$	
B	X UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			AUR0505589	3/1/2024	3/1/2025	EACH OCCURRENCE	\$ 10,000,000
							AGGREGATE	\$ 10,000,000
							\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE	OTH-ER
E.L. EACH ACCIDENT							\$	
E.L. DISEASE - EA EMPLOYEE							\$	
E.L. DISEASE - POLICY LIMIT							\$	
A	Commercial Property			6131M694966	3/1/2024	3/1/2025	Special - Building	22,450,000
C	Crime			106691578	3/1/2024	3/1/2025	Deductible \$1.000	300,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
27-37-47 North Central Avenue Hartsdale, NY 10530 *Units 73

CERTIFICATE HOLDER

CANCELLATION

Hartsdale Gardens Owners Corp c/o Robert Orlofsky Realty inc 7 Bryant Gardens - Suite 1C White Plains, NY 10605	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 



ADDITIONAL REMARKS SCHEDULE

AGENCY Levitt-Furst Associates, LTD		NAMED INSURED Hartsdale Gardens Owners Corp c/o Robert Orlofsky Realty Inc 7 Bryant Gardens - Suite 1C White Plains, NY 10605	
POLICY NUMBER SEE PAGE 1			
CARRIER SEE PAGE 1	NAIC CODE 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

**Addtl Coverages
Additional Policy:**

D&O, Travelers, Pol#106691578, Term 03/1/24 to 3/1/25, \$1 Million Limit

Additional Coverages:

**Replacement Cost/Agreed Amount
Building deductible \$5000
Boiler and Machinery - included up to Building Limit
Ordinance or Law A - Included up to Building Limit - \$5,000 Ded
Ordinance or Law B&C - \$5,000,000 Combined Limit - \$5,000 Ded
Flood - \$5,000,000 - \$10,000 Ded
Earthquake - \$5,000,000 - \$10,000 Ded
Underground Water - Included in Building Limit - \$10,000 Ded
Backup of Sewers and Drains- Included in Building Limit - \$5,000 Ded
Wind/Hail are not excluded subject to bldg ded.**

Crime Policy - Includes Managing Agent Non Compensated D&O Rider