BRYAGAR-01 NVERDERESE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/30/2026

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	CONTACT NAME:	
Levitt-Fuirst Associates, LLC 520 White Plains Road 2nd Floor Tarrytown, NY 10591	PHONE (A/C, No, Ext): (914) 457-4200	FAX (A/C, No): (914) 457-4200
	E-MAIL ADDRESS: info@levittfuirst.com	

INSURED	INSURER(S) AFFORDING COVERAGE	NAIC #
Bryant Gardens Corp 7 Bryant Crescent - Suite 1C White Plains, NY 10605	INSURER A : Greater New York Mutual Insurance Co.	22187
	INSURER B : Spinnaker Insurance Company	24376
	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	X COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR			6131M36915	11/2/2026	11/2/2027	DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ Included
	OTHER:						EMPLOYEE BENEFI	$ 1,000,000
A	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY X SCHEDULED AUTOS			1931C16371	11/2/2026	11/2/2027	BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
B	X UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	$ 5,000,000
	EXCESS LIAB CLAIMS-MADE			AUR0506542/AUR050000011	11/2/2026	11/2/2027	AGGREGATE	$ 5,000,000
	DED X RETENTION $ 10,000							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N						PER STATUTE OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
A	Commercial Property			6131M36915	11/2/2026	11/2/2027	BLDG AA/RC Special	77,050,000
A	Commercial Property			6131M36915	11/2/2026	11/2/2027	Ded 72 HR	4,750,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
1-15 Bryant Crescent and 175-185 Bryant Avenue White Plains, NY 10605
*Units - 410

CERTIFICATE HOLDER

Bryant Gardens Corp.
7 Bryant Crescent
c/o Robert Orlofsky Realty
White Plains, NY 10605

CANCELLATION

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



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AGENCY CUSTOMER ID: BRYAGAR-01 NVERDERESE

LOC #: 1

ADDITIONAL REMARKS SCHEDULE

AGENCY		NAMED INSURED
Levitt-Fuirst Associates, LLC		Bryant Gardens Corp 7 Bryant Crescent - Suite 1C White Plains, NY 10605
POLICY NUMBER		
SEE PAGE 1		
CARRIER	NAIC CODE	EFFECTIVE DATE: SEE PAGE 1
SEE PAGE 1	SEE P 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Additl Coverages
Agreed Amount /Replacement Cost Special Form
Inflation Guard 4%

D&O CNA Pol# 1001435577-01, Term 11/2/2026 to 11/2/2027 $1M Limit, $5000 Ded

Crime Travelers # 107301038 09/15/2026 to 09/15/2029 -$1,400,000 Limit $5,000 Ded

Managing Agent Rider Included

Additional Coverages:

Blanket Building Coverage Applies
Building Deductible - $25,000
Business Income is Actual Loss Sustained (ALS)
Equipment Breakdown - Included up to Building Limit - $25,000 Ded
Ordinance or Law - A - Undamaged Portion - Included in Building Limit
Ordinance or Law - B - Demolition - $3,775,000 - $25,000 Ded
Ordinance or Law - C- ICC - $3,775,000 - $25,000 Ded
Earthquake - $1,000,000 - 5% Ded
Flood - $1,000,000 - $50,000 Ded
Backup of Sewers/Underground Water - $1,000,000 - $25,000 Ded

*** Policy does not contain a Wind/Hail Exclusion or Separate Deductible**

Severability per policy form CG0001

Auto:
2017 GMC Vin: 1GT52VCG3HZ296774
2018 Jeep: Vin: 1C4AJWBG6JL812160

Mortgagee Clause
NATIONAL COOPERATIVE BANK NA AS NCB MASTER SERVICER ON BEHALF OF WILMINGTON TRUST NATIONAL ASSOCIATION AS TRUSUITEE FOR THE BENEFIT OF REGISTER HOLDERS OF BANK 2018 - BNK13 COMMERCIAL MORTGAGE PASS-THROUGH CERTIFICATES SERIES 2018-BNK13 2011 CRYSTAL DRIVE SUITE 800 ARLINGTON VA 22202

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