

ACORD CERTIFICATE OF LIABILITY INSURANCE DATE:

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 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 INSURANCE COMPANY	CONTACT NAME:	
	PHONE: (A/C, No, Ext):	FAX: (A/C, No):
	EMAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
INSURED NAME OF VENDOR	INSURER A: Travelers	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

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/YY)	POLICY EXP (MM/DD/YY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	H92J47221	1/1/2016	1/1/2017	EACH OCCURRENCE \$ 1,000,000
	DAMAGE TO RENTED PREMISES(Ea occur)						\$ 1,000,000
	MED EXP (Any one person)						\$ 10,000
	PERSONAL & ADV INJURY						\$ 1,000,000
	GENERAL AGGREGATE						\$ 2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER. <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER							PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	LDFI8729	1/1/2016	1/1/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	BODILY INJURY (Per Person)						\$
	BODILY INJURY (Per Accident)						\$
	PROPERTY DAMAGE (Per accident)						\$
							\$
B	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	JMEJ372	4/15/2016	4/15/2017	EACH OCCURRENCE \$ 2,000,000
	DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/>						AGGREGATE \$ 2,000,000
							\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	<input checked="" type="checkbox"/>	Must show coverage	2/1/2016	2/1/2017	PER STATUTE OTHER
	E.L. EACH ACCIDENT						\$ 1,000,000
	E.L. DISEASE - EA EMPLOYEE						\$ 1,000,000
	E.L. DISEASE - POLICY LIMIT						\$ 1,000,000
C	OTHER						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101. Additional Remarks Schedule, may be attached if more space is required)

INSERT BROOKFIELD ADDITIONAL INSURED LANGUAGE HERE
Brookfield Properties (USA II) LLC, AFL-CIO Building Investment Trust, BPREP 1801 California Street Owner, LLC, BIT Investment Ninety, LLC, PNC Financial Services Group, Inc., PNC Realty Investors, Inc., and their respective affiliates, shareholders, members (including members of members), partners (including partners of partners), subsidiaries, and related entities, and each of their respective successors and assigns.

CERTIFICATE HOLDER

INSERT CERT HOLDER DETAILS HERE
BPREP 1801 California Street Owner, LLC
BIT Investment Ninety, LLC
1801 California Street, Suite 200
Denver, CO 80202

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