Client#: 1068881

CERTIFICATE NUMBER:

ALLIARES7

REVISION NUMBER:

ACORD.

COVERAGES

CERTIFICATE OF LIABILITY INSURANCE

5/23/2017

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.
MERCETANIE WILL SEE A LAND TO ADDITIONAL INCURSE IN THE WAY A LAND A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A LAND AS A COURSE OF THE WAY AND A COURSE

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).

certificate floider in fled of such endorsement(s).				
PRODUCER	CONTACT Clorinda Thompson			
USI Insurance Services LLC	PHONE (A/C, No, Ext): 602-279-5800 FAX (A/C, No): 6	02-279-5899		
2375 E. Camelback Rd, Suite 250	E-MAIL ADDRESS: clorinda.thompson@usi.com			
Phoenix, AZ 85016	INSURER(S) AFFORDING COVERAGE	NAIC #		
602 279-5800	INSURER A: Gemini Insurance Company	10833		
NSURED	INSURER B : Admiral Insurance Company	24856		
Alliance Multifamily Builders, LLC 2525 E. Camelback Road, Suite 500	INSURER C : Endurance American Insurance Co 1			
	INSURER D : Aspen American Insurance Compan 43460			
Phoenix, AZ 85016	INSURER E: Travelers Property Cas. Co. 25			
	INSURER F:			

ISR TR	TYF	E OF INSU	RANCE	ADDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s
4	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X BI/PD Ded: \$5,000 GENL AGGREGATE LIMIT APPLIES PER: POLICY X PRO- OTHER:			VMGP002760	01/31/2017	01/31/2018	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$1,000,000 \$100,000 \$5,000 \$1,000,000 \$2,000,000 \$2,000,000	
E	ANY AUTO ALL OWNE AUTOS HIRED AUT	, _	SCHEDULED AUTOS NON-OWNED AUTOS		BA3958B417	12/01/2016	12/01/2017	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$1,000,000 \$ \$ \$ \$
3	DED WORKERS COM	RETENTION S' LIABILI	TY VIN		BEX0960257000	01/31/2017	01/31/2018	EACH OCCURRENCE AGGREGATE PER OTH- STATUTE ER	\$10,000,000 \$10,000,000 \$
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICERMEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	-			
C	Excess of \$10M Excess of \$15M			EXC30000246700 CX0056D17			\$15,000,000/\$15,000 \$25,000,000/\$25,000		

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

Re: Broadstone South Gulch, 777 8th Avenue South, Nashville, TN. The General Liability policy includes an automatic AdditionalInsured endorsement that provides Additional Insured status to the Certificate holder, only when there is a written contract or written agreement between the named insured and the certificate holder and with regard to work performed on behalf of the named insured. The General Liability policy includes an endorsement providing that 30 days notice of cancellation will be given to the Certificate (See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION
The Metropolitan Government of Nashville and Davidson County Metro Legal & Claims	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
C/O Insurance Safety Division	AUTHORIZED REPRESENTATIVE
222 3rd Ave North Ste #501 Nashville, TN 37201	William W. Rlebon

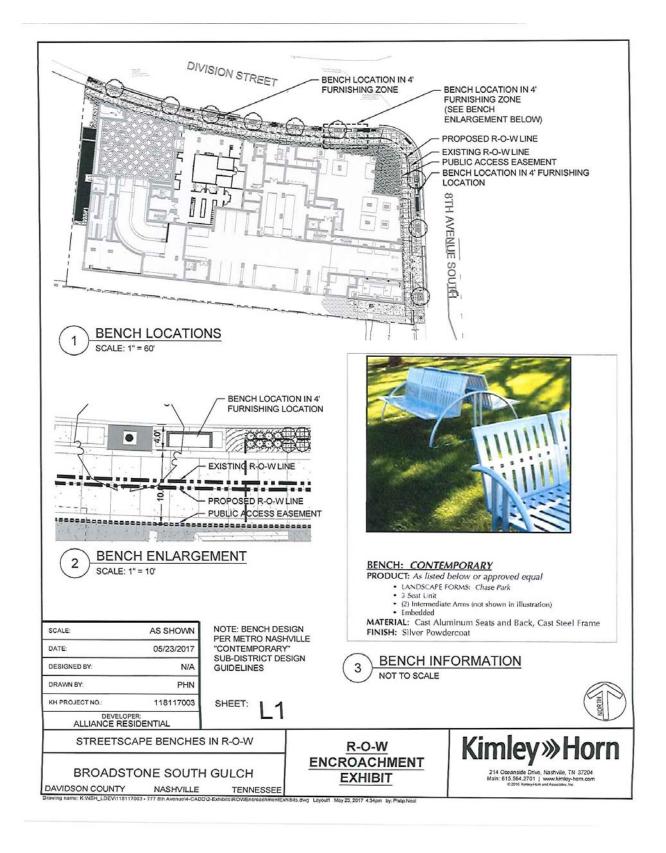
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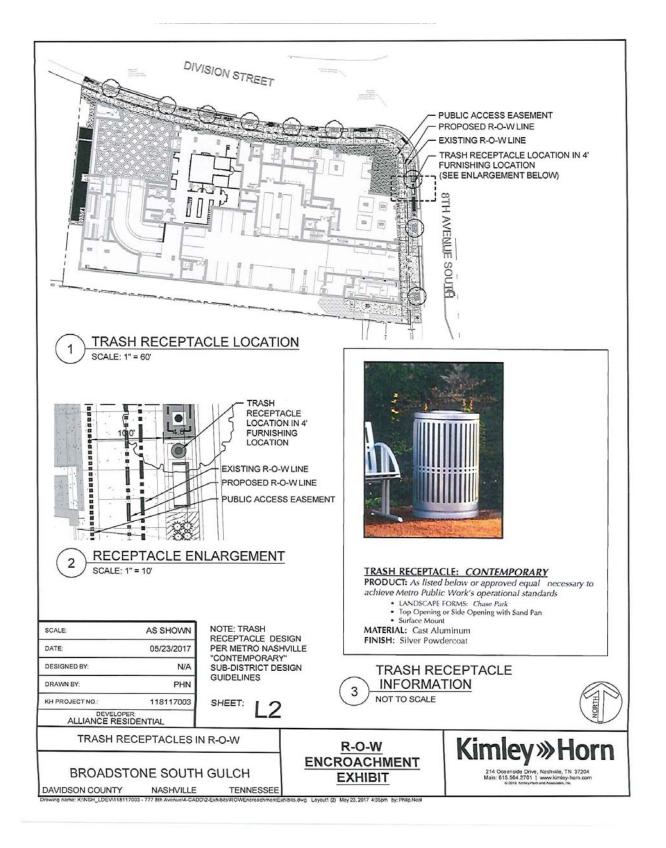
{N0145702.1} D-17-07702

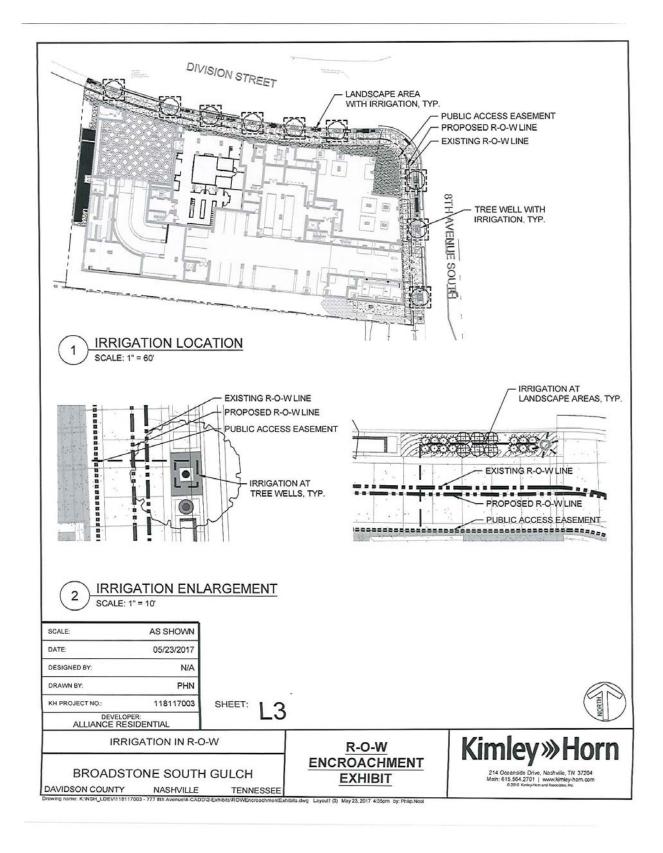
Proposal No. 2017M-022EN-001



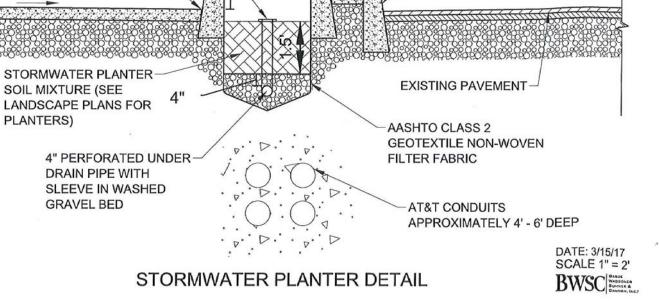
{N0145702.1} D-17-07702

Proposal No. 2017M-022EN-001





[N0145702.1] D-17-07702



1.5'

-EXPANSION JOINT (TYP)

STANDARD METRO **CURB AND GUTTER**

5'

2.5'

0.5'

ADS 6" DROP IN GRATE-

VARIES SEE C2.01

EXPANSION JOINT (TYP)-

SIDEWALK 2% MAX SLOPE

PLANTERS)