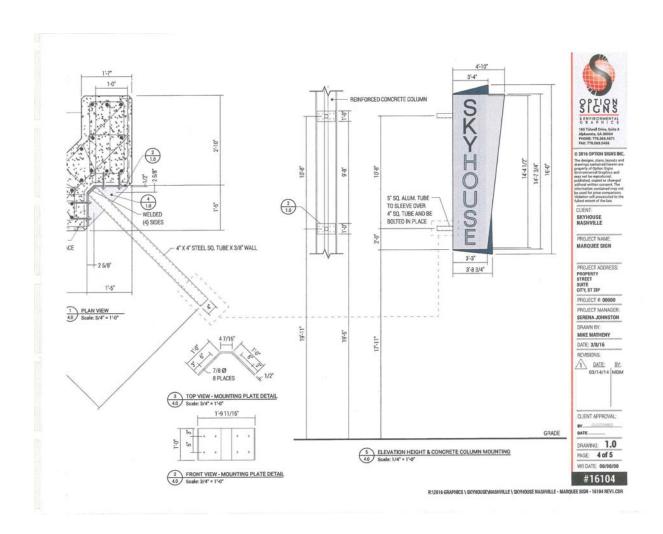
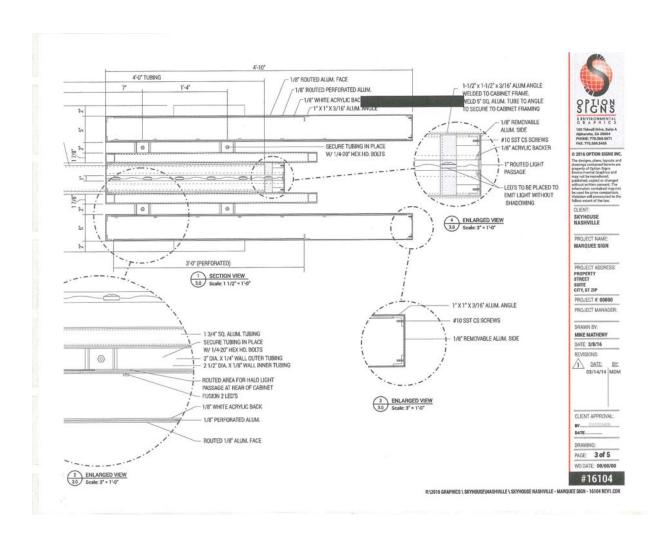
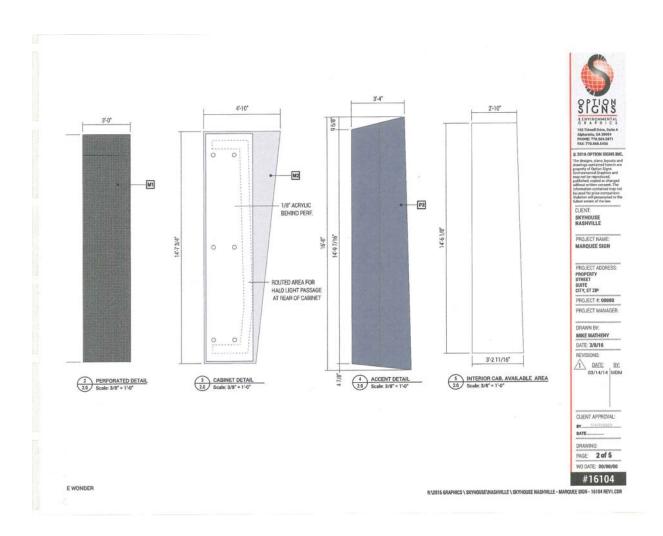
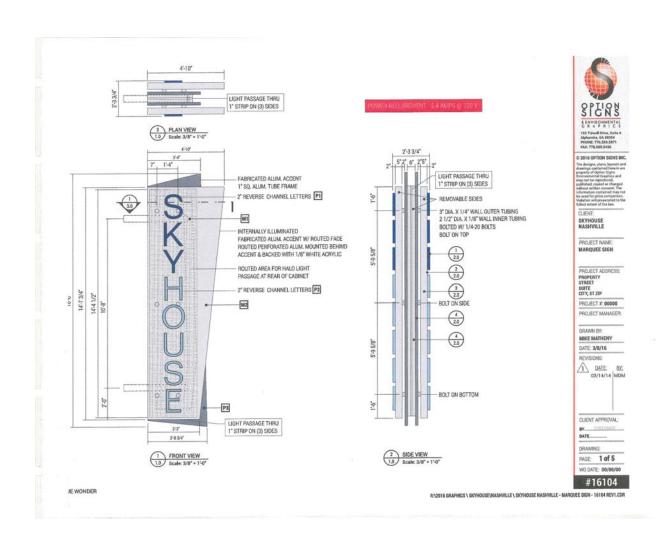
Proposal No. 2016M-028EN-001



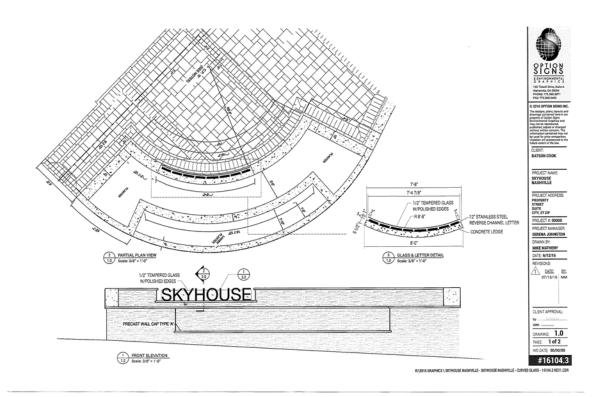


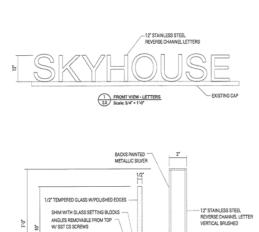










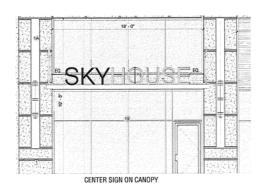




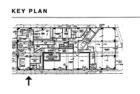


R12016 GRAPHICS 1. SKYHOUSE NASHVILLE - SKYHOUSE NASHVILLE - CURVED GLASS - 16104.3 REVI.COR





BUILDING ENTRY SIGNAGE - NORTH ELEVATION - QTY: 1





MATERIAL DETAILS

A. 24 tall, 3 thick anodized aluminum channel letters.
Painted all sides to match PMS colors as noted below.
Conceated mounting required.
Staff Dear Cost filesh required.
Vector art for logo available from SRSSA.

SKYHOUSE BRAND COLORS





#10104 B-12016 GRAPHICS \ SKYHOUSE \ NASHVILLE \ SKYHOUSE - NASHVILLE - 16164 REVLCTO



DATE (MM/DD/YYYY) 06/08/2016

CERTIFICATE OF LIABILITY INSURANCE 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 MARSH NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: FAX (A/C, No): TWO ALLIANCE CENTER 3560 LENOX ROAD, SUITE 2400 ATLANTA, GA 30326 INSURER(S) AFFORDING COVERAGE NAIC # INSURER A : Zurich American Insurance Co 100000-Novar-Main-15-16 16535 INSURED SkyHouse Nashville, LLC INSURER B : ACE Property And Casualty Ins Co 20699 INSURER C: N/A N/A 817 West Peachtree Street, STE. 400 Atlanta, GA 30308 INSURER D: INSURER E : INSURER F: COVERAGES CERTIFICATE NUMBER: ATL-003973287-01 REVISION NUMBER:2 THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTOWTHETANDING 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. ADDL SUBR POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER CPO6724627-05 X COMMERCIAL GENERAL LIABILITY 09/01/2015 09/01/2016 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) CLAIMS-MADE X OCCUR 1,000,000 X No Deductible/SIR 10,000 MED EXP (Any one person) 1,000,000 PERSONAL & ADV INJURY GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE 2.000.000 POLICY PRO- X LOC 2,000,000 PRODUCTS - COMP/OP AGG OTHER: AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT (Ea accident) S ANY ALITO BODILY INJURY (Per person) ALL OWNED AUTOS SCHEDULED AUTOS NON-OWNED AUTOS BODILY INJURY (Per accid ent) \$ PROPERTY DAMAGE (Per accident) HIRED AUTOS 5 s X UMBRELLA LIAB M00523847 09/01/2015 09/01/2016 X OCCUR 5,000,000 EACH OCCURRENCE s EXCESS LIAB CLAIMS-MADE AGGREGATE 5,000,000 DED X RETENTION \$ 10,000 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY PER OTH-ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT NIA E.L. DISEASE - EA EMPLOYEE \$ f yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT | S DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Certificate holder is/are included as additional insured (except workers compensation) where required by written contract. CERTIFICATE HOLDER CANCELLATION The Metropolitan Government of Nashville and Davidson County SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Metro Legal & Claims C/O Insurance and Safety Division 222 3rd Avenue North, Ste #501 AUTHORIZED REPRESENTATIVE of Marsh USA Inc. Nashville, TN 37201 Manaori Muchenger

ACORD 25 (2014/01)

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Manashi Mukheriee