## Sample Certificate of Insurance (Master Agreement)

## ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

TBD

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	CONTACT NAME:				
	PHONE (A/C, No, Ext):	FAX (A/C, No):			
AGENT INFORMATION	E-MAIL ADDRESS				
	INSURER(S) AFFORDING COVER AG	SE NAIC#			
	INSURER A: INSURANCE COMPANY NAME				
INSURED	INSURER B: INSURANCE COMPANY NAME				
CONTRACTORA/ENDOR INFORMATION	INSURER C: INSURANCE COMPANY NAME				
CONTRACTOR/VENDOR INFORMATION	INSURER D: INSURANCE COMPANY NAME				
	INSURER E: INSURANCE COMPANY NAME				
	INSURER F: INSURANCE COMPANY NAME				

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

	XCLUSIONS AND CONDITIONS OF SUCF						15.	
INSR LTR	TYPE OF INSURANCE		SUBR		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
lΑ	GENERAL LIABILITY			POLICY NUMBER	TBD	TBD	EACH CCURRENCE	\$1,000,000
	X COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000
	CLAIMS-MADE X OCCUR	Y	Y				MED EXP (Any one person)	\$10,000
							PERSONAL & ADV INJURY	\$1,000,000
							GENERAL AGGREGATE	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$1,000,000
	POLICY X PRO- JECT LOC							\$
Α	AUTOMOBILE LIABILITY			POLICY NUMBER	TDB	TBD	COMBINED SINGLE LIMIT Ea accident	\$1,000,000
	ANY AUTO						BODILY INJURY (Per person)	\$
	X ALL OWNED SCHEDULED AUTOS	Y	Y				BODILY INJURY (Per accident)	\$
	X HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
							,	\$
В	X UMBRELLA LIAB X OCCUR	\ <sub>Y</sub>	Y	POLICY NUMBER	TBD	TBD	EACH OCCURRENCE	\$5,000,000
	EXCESS LIAB CLAIMS-MADE		'				AGGREGATE	\$5,000,000
	DED RETENTION \$							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			POLICY NUMBER	TBD	TBD	X WC STATU- TORY LIMITS OTH- ER	
c	ANY DEODDIETOD/DADTNED/EVECUTIVE	N/A					E.L. EACH ACCIDENT	\$1,000,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under		ή γ				E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required~

## 10100 Katy Freeway, Houston, 77043

Additional insured in favor of Metro National Corporation, Freeway Norwest I, LLC, and Transwestern Property Company SW GP, L.L.C. with regards to Automobile Liability, General Liability, Environmental Liability and Umbrella Liability policies. Waiver of Subrogation in favor of Metro National Corporation, Freeway Norwest I, LLC, and Transwestern Property Company SW GP, L.L.C with regard to all policies which will be considered Primary and Noncontributory. Metro National Corporation, Freeway Norwest I, LLC, and Transwestern Property Company SW GP, L.L.C. are named as Alternate Employers on the Worker's Compensation policy. A 30-day notice of cancellation is provided to the certificate holder.

CERTIFICATE HOLDER	CANCELLATION			
Freeway Norwest I, LLC c/o Metro National Corporation 10100 Katy Freeway, Suite 140 Houston, TX 77043	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			