

# CERTIFICATE OF INSURANCE

ISSUE DATE

(MM/DD/YY)

**PRODUCER**

**125 Summer**

**Tenant Sample**

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW

**COMPANIES AFFORDING COVERAGE**

COMPANY  
LETTER A  
COMPANY  
LETTER B

COMPANY  
LETTER C  
COMPANY  
LETTER D  
COMPANY  
LETTER E

**INSURED**

**COVERAGE'S**

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	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	<b>GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$1,000,000 FIRE DAMAGE (Any one fire) \$50,000 MED EXP(Any one person) \$5,000 PERSONAL & ADV INJURY GENERAL AGGREGATE \$2,000,000 PRODUCTS-COMP/OP AGG
	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY		SAMPLE		COMBINED SINGLE LIMIT \$2,000,000 BODILY INJURY (Per Person) \$2,000,000 BODILY INJURY (Per Accident) \$2,000,000 PROPERTY DAMAGE \$2,000,000
	<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				
	<b>EXCESS LIABILITY</b> <input checked="" type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				\$5,000,000
	<b>WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY</b> THE PROPRIETOR/ PARTNERS/EXECUTIVE <input type="checkbox"/> INCL OFFICERS ARE: <input type="checkbox"/> EXCL				<b>STATUTORY LIMITS</b> EACH ACCIDENT \$1,000,000 DISEASE-POLICY LIMIT \$1,000,000 DISEASE-EACH EMPL. \$1,000,000
	<b>OTHER</b>				

Additionally Insured



**Description of Operations/Locations/Vehicles/Special Items**

All insurance policies (other than Worker's Compensation and Employer's Liability) policies shall name as additional insureds: OPG 125 Summer Owner (DE) LLC, a Delaware limited liability company; Oxford I Asset Management USA Inc., a Delaware corporation; OPG 125 Summer TRS (DE) LLC, a Delaware limited liability company; 125 Summer Office Voting Joint Venture (DE) LP, a Delaware limited partnership; OPG Investment Holdings GP (US), LLC, a Delaware limited liability company; and their respective agents, members, partners, employees, officers, directors, shareholders and lenders.

**CERTIFICATE HOLDER**

OPG 125 Summer Owner (DE) LLC  
 c/o Oxford Properties Group  
 125 Summer Street  
 Boston, MA 02110

Tenant

**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