



EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)
10/28/2020

THIS EVIDENCE OF COMMERCIAL PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

PRODUCER NAME, CONTACT PERSON AND ADDRESS North Shore Risk Management 1983 Marcus Avenue (Suite 125) Lake Success, NY 11042 Steven Potolsky		PHONE (A/C, No, Ext): 516-326-9300	COMPANY NAME AND ADDRESS Fireman's Fund Insurance Co. P.O. Box 7777 Philadelphia, PA 19175-3940	NAIC NO: 21873
FAX (A/C, No): 516-326-9310	E-MAIL ADDRESS:	IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH		
CODE: AGENCY CUSTOMER ID #: FAIRV-2	SUB CODE:	POLICY TYPE Commercial Package		
NAMED INSURED AND ADDRESS Fairview Owners Corp. c/o Metro Management 42-25 21st Street Long Island City, NY 11101		LOAN NUMBER	POLICY NUMBER NYP2007744-20	
ADDITIONAL NAMED INSURED(S)		EFFECTIVE DATE 10/25/20	EXPIRATION DATE 10/25/21	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
		THIS REPLACES PRIOR EVIDENCE DATED:		

PROPERTY INFORMATION (ACORD 101 may be attached if more space is required) **BUILDING** OR **BUSINESS PERSONAL PROPERTY**

LOCATION / DESCRIPTION 61-20 Grand Central Parkway Forest Hills, NY 11375
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 EVIDENCE OF PROPERTY INSURANCE 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.

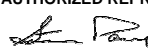
COVERAGE INFORMATION PERILS INSURED BASIC BROAD SPECIAL

COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$	120,250,000			DED:	10,000
	YES	NO	N/A		
<input checked="" type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> RENTAL VALUE	X			If YES, LIMIT: 7,125,000	Actual Loss Sustained; # of months:
BLANKET COVERAGE		X		If YES, indicate value(s) reported on property identified above: \$	
TERRORISM COVERAGE	X			Attach Disclosure Notice / DEC	
IS THERE A TERRORISM-SPECIFIC EXCLUSION?		X			
IS DOMESTIC TERRORISM EXCLUDED?		X			
LIMITED FUNGUS COVERAGE		X		If YES, LIMIT:	DED:
FUNGUS EXCLUSION (If "YES", specify organization's form used)			X		
REPLACEMENT COST	X				
AGREED VALUE	X				
COINSURANCE		X		If YES, %	
EQUIPMENT BREAKDOWN (If Applicable)	X			If YES, LIMIT: 120,000,000	DED: 10,000
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg	X			If YES, LIMIT: 120,000,000	DED: 10,000
- Demolition Costs	X			If YES, LIMIT: 20,000,000	DED: 10,000
- Incr. Cost of Construction	X			If YES, LIMIT: 20,000,000	DED: 10,000
EARTH MOVEMENT (If Applicable)	X			If YES, LIMIT: 10,000,000	DED: 50,000
FLOOD (If Applicable)	X			If YES, LIMIT: 1,000,000	DED: 100,000
WIND / HAIL INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:	X			If YES, LIMIT: 120,000,000	DED: 10,000
NAMED STORM INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:	X			If YES, LIMIT: 120,000,000	DED: 10,000
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS	X				

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.

ADDITIONAL INTEREST

CONTRACT OF SALE <input type="checkbox"/> MORTGAGEE <input type="checkbox"/>	LENDER'S LOSS PAYABLE <input type="checkbox"/> LOSS PAYEE <input type="checkbox"/>	LENDER SERVICING AGENT NAME AND ADDRESS
NAME AND ADDRESS Evidence of Insurance		AUTHORIZED REPRESENTATIVE 

NOTES:

INSURED'S NAME Fairview Owners Corp.

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Ordinance or Law:

Demolition and increased cost of construction Limits are a combined \$20,000,000. ; Business personal property included at \$250,000.

Boiler & Machinery Coverage is furnished by:

Travelers Indemnity Company

Policy #: TBA

Policy Effective: 10/25/20-21