

<b>CERTIFICATE OF LIABILITY INSURANCE</b>							DATE (MM/DD/YY)		
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 endorsements.									
PRODUCER				CONTACT NAME:					
				PHONE (A/C, No, Ext)			FAX (A/C, No)		
				E-MAIL ADDRESS:					
				INSURERS AFFORDING COVERAGE				NAIC #	
				INSURER A: <b>(Insurer must have a rating of A or higher.)</b>					
INSURED  Sample Certificate of Insurance – Moderate Risk				INSURER B:					
				INSURER C:					
				INSURER D:					
				INSURER E:					
				INSURER F:					
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.									
INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF DATE(MM/DD/YY)	POLICY EXP DATE(MM/DD/YY)	LIMITS		
	GENERAL LIABILITY  COMMERCIAL GENERAL LIABILITY  CLAIMS MADE    OCCUR  _____  GEN'L AGGREGATE LIMIT APPLIES PER:  POLICY    PROJECT    LOC						EACH OCCURRENCE	<b>\$ 1,000,000</b>	
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
							MED EXP (Any one person)	\$	
							PERSONAL & ADV INJURY	<b>\$ 1,000,000</b>	
							GENERAL AGGREGATE	<b>\$ 2,000,000</b>	
							PRODUCTS-COMPIOP AGG	<b>\$ 2,000,000</b>	
	AUTOMOBILE LIABILITY  ANY AUTO  ALL OWNED AUTOS    SCHEDULED AUTOS  HIRED AUTOS    NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	<b>\$ 1,000,000</b>	
							BODILY INJURY (Per person)	\$	
							BODILY INJURY(Per accident)	\$	
							PROPERTY DAMAGE (Per accident)	\$	
	UMBRELLA LIAB    OCCUR  EXCESS LIAB    CLAIMS MADE  DED    RETENTION \$						EACH OCCURRENCE	<b>\$ 5,000,000</b>	
							AGGREGATE	<b>\$ 5,000,000</b>	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input checked="" type="checkbox"/> WC STATU-ORY LIMITS <input type="checkbox"/> OTH-ER		
							E.L. EACH ACCIDENT	<b>\$ 1,000,000</b>	
							EL DISEASE-EA EMPLOYEE	<b>\$ 1,000,000</b>	
							EL DISEASE - POLICY LIMIT	<b>\$ 1,000,000</b>	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)									
<p><b>BPP STPCV LOWER REIT INC. AND ANY OF ITS SUBSIDIARIES; INCLUDING, WITHOUT LIMITATION, BPP ST OWNER LLC, BPP PCV OWNER LLC, AND STUYTOWN PROPERTY SERVICES; EMPIRE CORE GROUP LLC; AND ANY PERSON OR ENTITY THAT DIRECTLY OR INDIRECTLY OWNS ANY ECONOMIC OR OTHER INTEREST IN BPP STPCV LOWER REIT INC. AND ANY OF ITS SUBSIDIARIES; OR IN ANY SUCH PERSON OR ENTITY, INCLUDING ANY GENERAL PARTNERSHIP OR SIMILAR INTEREST IN ANY OF THE FOREGOING; AND ANY MANAGER OR PROPERTY MANAGER OF, OR LENDER TO, OR PERSON OR ENTITY OTHERWISE ENTITLED TO ACT ON BEHALF OF, ANY OF THE FOREGOING; AND ANY AFFILIATES, RELATED PERSONS, SUCCESSORS, ASSIGNS OR DIRECT OR INDIRECT OWNERS OF ANY OF THE FOREGOING have been included as an additional insured on the general liability policy.</b></p>									
CERTIFICATE HOLDER					CANCELLATION				
<b>StuyTown Property Services</b> Attn: Risk Management 276 First Avenue Loop New York, NY 10009					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				