



CERTIFICATE OF INSURANCE REQUIREMENTS

1. Anyone performing contracted work or services of unit owners anywhere on Lawn Terrace Owners Corporation owned property must submit the following documentation prior to commencement of any work or service:
 - a. Filled Out Certificate of Insurance as shown on page 2
 - i. Certificate holder as shown on page 2
 - ii. Description of operation as shown on page 2
 - iii. Limits of coverages as shown on page 2 and pages 3-6
 - b. Filled Out Certificate of Workers Compensation
 - i. Limits of coverages as shown on page 2 and pages 3-6
 - c. Filled out and signed Addendum to Contract
 - i. As shown on pages 3-6
 - ii. Countersigned by the Owner/Managing Agent
2. Shareholders/Leaseholders hiring contractors without insurance will be considered negligent and legal action will be taken against them in case of any claims arising against Lawn Terrace Owners Corporation and related to work done on their premises.
3. Please submit completed information to Gramatan Management (914) 654-1414 at least 1 week prior to scheduled work or service.
4. Lawn Terrace Owners Corporation reserves the right to modify these requirements as needed.

ACORD CERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YY)
00/00/0000

PRODUCER FAX	THIS CERTIFICATE 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.
* NAME AND ADDRESS OF INSURANCE CARRIER	
INSURED	INSURERS AFFORDING COVERAGE
* NAME AND ADDRESS OF INSURED	INSURER A: XXXXXXXXXXXX
	INSURER B: XXXXXXXXXXXX
	INSURER C:
	INSURER D:
	INSURER E:

COVERAGES
THE POLICES 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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INS LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXP DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> _____ <input type="checkbox"/> _____ GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	XXXXXXXXXXXX	00/00/00	00/00/00	EACH OCCURRENCE	\$ 1,000,000
	DAMAGE TO RENTED PREMISES				\$ 1,000,000	
	MED EXP (any 1 person)				\$ 10,000	
	PERSONAL & ADV INJURY				\$ 1,000,000	
	GENERAL AGGREGATE				\$ 2,000,000	
	PRODUCTS - COM/PO/ AGG				\$ 2,000,000	
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON OWNED AUTOS <input type="checkbox"/> _____ <input type="checkbox"/> _____	XXXXXXXXXXXX	00/00/00	00/00/00	COMBINED SINGLE LIMIT (Ea Accident)	\$
	BODILY INJURY (per person)				\$	
	BODILY INJURY (per accident)				\$	
	PROPERTY DAMAGE (Per accident)				\$	
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> _____	XXXXXXXXXXXX	00/00/00	00/00/00	AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN AUTO ONLY	EA ACC \$
					AGG	\$
B	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$	XXXXXXXXXXXX	00/00/00	00/00/00	EACH OCCURRENCE	\$
	AGGREGATE				\$	
					\$	
					\$	
					\$	
*	WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	XXXXXXXXXXXX	00/00/00	00/00/00	<input type="checkbox"/> WC Statutory Limits <input type="checkbox"/> Other	
	E.L. EACH ACCIDENT				\$	
	E.L. DISEASE -EA EMPLOYEE				\$	
	E.L. DISEASE -POLICY LIMIT				\$	
OTHER						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS:
Also insured:
a) Cooperative Building and address
b) Gramatan Management, 2975 Westchester Avenue, Suite G01- Purchase, NY 10577
c) Date of Delivery:

CERTIFICATE HOLDER _____	CANCELLATION
Resident's Name Address with Unit # City, State, Zip	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE

*IF WORKERS COMP IS NOT ON THIS CERTIFICATE - YOU MUST PROVIDE (2) CERTIFICATES FROM STATE INSURANCE FUND (ONE FOR EACH ADDITIONAL INSURED)



LAWN TERRACE
Owners Corporation

ADDENDUM TO CONTRACT

Date: _____

This Agreement is made this day by and between:

NAME OF THE LEASEHOLDER: _____

APARTMENT NUMBER: _____

Hereafter referred to as "Owner", and:

(Legal name of Contractor)

Hereafter referred to as "CONTRACTOR", with respect to the performance and provision by Contractor to Owner and/or Managing Agent and/or Individual Apartment Leaseholder of certain work, services, labor and/or materials, described herein as:

(all as more fully described in the contract, invoice, purchase order or other attached document referencing the Contractor's work and services to be provided, which is incorporated by reference herein and made a part hereof),

Hereinafter referred to as "the work", and the contract amount for said work being:

\$ _____

It is hereby further agreed:

1. INDEMNIFICATION:

To the fullest extent permitted by law, Contractor agrees to indemnify, defend and hold harmless Owner and or Managing Agent from and against any and all suits, actions, liabilities, damages, professional fees, including attorneys' fees, costs, court costs, expenses, disbursements or claims of any kind or nature for injury to or death of any person or damage to any property (including loss of use thereof) arising out of or in connection with the performance of the Work of the Contractor, its agents, servants, subcontractors or employees, or the use by Contractor, its agents, servants, subcontractors or employees, of any premises or facilities, or part thereof, of the Owner and or Managing Agent. This agreement to indemnify specifically includes full indemnity in the event of liability imposed against the Owner and or Managing Agent without any negligence or fault on the part of Owner and or Managing Agent and solely by reason of statute, operation of law or otherwise. In the event any negligence or fault is assigned or apportioned to the Owner and or Managing Agent, this agreement specifically includes partial indemnity of Owner and or Managing Agent but limited to any liability imposed over and above that percentage attributed to the Owner and or Managing Agent.

2. INSURANCE

Contractor shall obtain and maintain at all times during the term of this agreement, at its sole cost and expense, the following insurance (a) Workers Compensation insurance with statutory limits and employer's liability coverage of not less than \$500,000; (b) Commercial General Liability insurance with a minimum limit of \$ 1,000,000 per occurrence and \$ 2,000,000 in the aggregate, which insurance shall cover the following: premises and operations liability, contractual liability, products/completed operations, personal & advertising injury and independent contractor's liability; (c) Automobile Liability insurance covering owned, hired and non-owned vehicles, with a minimum limit of liability of \$1,000,000; and (d) Umbrella or Excess liability insurance with a limit of \$5,000.000 per occurrence and a general aggregate of \$5,000.000. All of Contractor's insurance policies shall include Owner and Managing Agent as additional insureds. The coverage afforded to Owner and Managing Agent under Contractor's policies shall be primary to, and non-contributing with any other insurance, primary, excess, or umbrella available to Owner and Managing Agent. If Contractor fails to procure insurance for the Owner and Managing Agent as required, recoverable damages shall not be limited to the cost of premiums for such additional insurance, but shall include all sums expended, and damages incurred by Owner and Managing Agent, and their respective insurers, which would have otherwise been paid by the Contractor's required insurance.

Prior to commencing "the Work" described in this Agreement, Contractor shall provide Owner and or Managing Agent a Certificate of Insurance evidencing compliance with the insurance procurement requirements herein, in standard ACORD form.

In the event any part of this Addendum conflicts with any other provisions between Owner/Managing Agent and Contractor regarding indemnity or insurance requirements, this Addendum controls. This Agreement cannot be modified orally, and any commencement of "the Work" described in the Agreement by the Contractor, or its agents, servants, employees or subcontractors shall constitute an acceptance of this

written Agreement as is and shall have the same force and effect as though same were fully executed.

Dated: _____

Owner/Managing Agent By: _____

Individual Leaseholder By: _____

Contractor By: _____