

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/10/2025

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 have ADDITIONAL INSURED provisions or 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).

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PRODUCER				CONTACT Mary McCoy				
The Hilb Group	New England, LLC			PHONE A/C, No, Ext): (800) 232-0582	FAX (A/C, No):	(888)	505-9300
2000 Chapel V	iew Blvd			MADDRESS: mmccoy@hilbgroup.com				
Suite 240				INSURER(S) AFFORDING COV	'ERAGE			NAIC #
Cranston		RΙ	02920	NSURER A: Cincinnati Insurance Company				10677
INSURED				NSURER B: Cincinnati Casualty Company				28665
	New England Construction Co., Inc.			NSURER C: SiriusPoint Specialty Insurance (Corp			16820
	293 Bourne Avenue			NSURER D: Pacific Insurance Company, Ltd				10046
				NSURER E :				
	Rumford	RI	02916	NSURER F :				
COVEDACES	CEDTIFICATE NUMBER	٥.	CL 251010997	DEVISIO	M NIIMDED.			

COVERAGES CERTIFICATE NUMBER: CL25101099779 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	VSR TYPE OF INSURANCE		SUBR	POLICY NUMBER	POLICY EFF	POLICY EXP	LIMITS
A A	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE CCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- JECT LOC	INSD	WVD	POLICY NUMBER ENP0728729	10/14/2025	10/14/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
Α	OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY			EBA0728733	10/14/2025	10/14/2026	\$ COMBINED SINGLE LIMIT \$ 1,000,000 (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
Α	UMBRELLA LIAB CCCUR CLAIMS-MADE DED RETENTION \$			ENP0728729	10/14/2025	10/14/2026	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			EWC0728731	10/14/2025	10/14/2026	PER OTH- E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
С	Excess Liability (\$5MM xs \$5MM)			ARCUSXC265602025	10/14/2025	10/14/2026	Excess of Primary \$5,000,000 Excess Aggregate Limit \$5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

INSURER D: Contractor's Pollution Liab. & Professional Liability (10/14/2025 - 10/14/2026). Policy #02 CPIAZ7848-Pacific Insurance Company, Ltd. - NAIC 10046. Pollution Legal Liability \$3,000,000; Job Site Pollution \$3,000,000/\$25,000 Retention; Contractors Professional Liability \$2,000,000/\$25,000 Retention.

CERTIFICATE HOLDER	CANCELLATION			
FOR INFORMATIONAL PURPOSES ONLY	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			
1	Joseph S taumen			