

ACORD CERTIFICATE OF LIABILITY INSURANCE					DATE (MM/DD/YY)	
PRODUCER						
INSURED						
INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	EFFECTIVE	EXPIRED	LIMITS	
	<input checked="" type="checkbox"/> GENERAL LIABILITY	#####	#####	#####	EACH OCCURRENCE	\$1,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GL X OCCUR	#####			FIRE DAMAGE	\$100,000.00
	<input type="checkbox"/>				MED EXP	\$5,000.00
	<input checked="" type="checkbox"/> PROJECT				PERSONAL INJURY	\$1,000,000.00
	<input type="checkbox"/>				GENERAL AGGREGATE	\$2,000,000.00
	<input type="checkbox"/>				PRODUCTS AGGREGATE	\$2,000,000.00
	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY X ANY	#####	#####	#####	COMBINED SINGLE LIMIT	\$1,000,000.00
	<input checked="" type="checkbox"/> SCHEDULED AUTOS					
	<input checked="" type="checkbox"/> HIRED AUTOS					
	<input checked="" type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY					
	<input checked="" type="checkbox"/> EXCESS LIABILITY OCCUR	#####			EACH OCCURRENCE	\$1,000,000.00
	<input type="checkbox"/>					
	WORKERS COMPENSATION & EMPLOYERS LIABILITY	#####			<input checked="" type="checkbox"/> WC STATUTORY LIMITS	
					E.L. EACH ACCIDENT	\$500,000.00
					E.L. DISEASE - EACH EMPLOYEE	\$500,000.00
					E.L. DISEASE - POLICY LIMIT	\$500,000.00
	OTHER					
DESCRIPTION OF OPERATION/ LOCATIONS/ VEHICLE/ EXCLUSIONS ADDED BY ENDORSEMENT/ SPECIAL PROVISIONS RE: JOB NAME Brookstone, L.P. and project owner are named as additional insured for the General, Auto, and Excess Liability policies. The coverage provided to the additional insured is primary and non-contributory. A waiver of subrogation in favor of Brookstone L.P. and Owner is provided for the General, Auto, Excess, and Workers Compensation policies. Thirty (30) days prior notice of cancellation or material change except ten (10) days for non payment will be mailed to certificate holder.						
CERTIFICATE HOLDER Brookstone, L.P. 3715 Dacoma Street Houston, TX 77092 713.683.8800 ph / 713.680.0088 fax			CANCELLATION Should any of the above described policies be cancelled before the expiration date thereof, the insured will mail 30 days written notice to the certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.			