



ADDITIONAL REMARKS SCHEDULE

AGENCY Aon Risk Insurance Services West, Inc.		NAMED INSURED Fort Point Associates, Inc.	
POLICY NUMBER See Certificate Number: 570095589825			
CARRIER See Certificate Number: 570095589825	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Additional Description of Operations / Locations / Vehicles:

Compensation policies as required by written contract. Contractual Liability is included in the General Liability policy. Stop Gap Coverage for the following states: OH, ND, WA, WY.