



CLEARBROOK COMMUNITY ASSOCIATION  
1 Clearbrook Drive, Monroe Township, NJ 08831  
p. (609)-655-2706 f. (609)-655-9688  
www.clearbrook-nj.com

Dear Contractor/Vendor:

As required by our insurance carrier, please provide a current Certificate of Insurance for our files. Confirmation of the existence of coverage is required before you start work. Please send or deliver a copy of these requirements to your insurance agent so that they can provide us with an acceptable Certificate of Insurance before you start work. The Certificate must meet the following requirements:

Clearbrook Community Association, Inc. must be named as an Additional Insured under your Commercial General Liability policy with reference to this work and/or contract. Your certificate of insurance must include the following wording: **Clearbrook Community Association, Inc., Clearbrook Condominium Associations #1-12 and #14-18A&18B and Taylor Management Company**

The following minimum limits and conditions are recommended:

*Commercial General Liability* of \$1,000,000 - Each Occurrence, \$1,000,000 - Personal Injury and Advertising Liability, \$2,000,000 - Products/Completed Operations Aggregate, and \$2,000,000 - General Aggregate.

*Automobile Liability* of \$1,000,000 combined single limit per accident including coverage for owned, non-owned, and hired vehicles.

*Workers Compensation* (in accordance with applicable Statutes) and *Employers' Liability* Limits of \$500,000/\$500,000/\$500,000. **ANY PROPRIETER/PARTNER/EXEC OFFICER/MEMBER SHOULD BE EXCLUDED? BOX SHOULD READ:**  N

The Certificate Holder named on the Certificate of Insurance should read:

**Clearbrook Community Association, Inc.  
Clearbrook Condominium Associations  
#1-12 and #14-18A & 18B  
Taylor Management Company  
1 Clearbrook Drive  
Monroe Township, NJ 08831**

Certificates are necessary for annual insurance audits. Renewal Certificates must be received at least 15 days prior to the expiration of your policies.

Thank you for your prompt response to this request.

Sincerely,

Andrea Wolstromer  
Community Administrator  
awolstromer@taylormgt.com  
609-655-2706 x228



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/26/2022

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).

<b>PRODUCER</b> ABC Insurance Company 123 Main Street Anywhere, USA 12345	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): _____ FAX (A/C, No): _____ E-MAIL ADDRESS: _____	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> SAMPLE 1 Main Street Anywhere, USA 12345	<b>INSURER A :</b>	
	<b>INSURER B :</b>	
	<b>INSURER C :</b>	
	<b>INSURER D :</b>	
	<b>INSURER E :</b>	
	<b>INSURER F :</b>	

**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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR _____ GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: _____	X		123456	01/26/2022	01/26/2023	EACH OCCURRENCE \$ 1,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000						
	MED EXP (Any one person) \$ 5,000						
	PERSONAL & ADV INJURY \$ 1,000,000						
	GENERAL AGGREGATE \$ 2,000,000						
	PRODUCTS - COMP/OP AGG \$ 2,000,000						
	\$						
B	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY	X		123456	01/26/2022	01/26/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	BODILY INJURY (Per person) \$						
	BODILY INJURY (Per accident) \$						
	PROPERTY DAMAGE (Per accident) \$						
	\$						
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED \$    RETENTION \$						EACH OCCURRENCE \$
	AGGREGATE \$						
	\$						
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	123456	01/26/2022	01/26/2023	<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 Clearbrook Community Association, Clearbrook Condominium Associations 1-12, 14-18A & 18B, and Taylor Management Company  
 1 Clearbrook Drive, Monroe Township, NJ 08831 are named as additional insureds.

<b>CERTIFICATE HOLDER</b> Clearbrook Community Association & Clearbrook Condominium Associations 1-12, 14-18A & 18B, Taylor Management Company 1 Clearbrook Drive Monroe Township, NJ 08831	<b>CANCELLATION</b> 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
--	--