

New Empire Group, Ltd.
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CERTIFICATE OF PARTICIPATION

PRODUCER:

CERTIFICATE NUMBER:

MASTER POLICY NUMBER: See below

METROPOLITAN COMMERCIAL REAL ESTATE ASSOCIATION RISK PURCHASING GROUP

Risk Purchasing Group Member and Mailing Address:

Designated Location(s) and Named Insured(s): See Schedule of Locations Form and Named Insured Schedule Form attached to and forming part of this Certificate of Coverage.

EFFECTIVE DATE:

EXPIRATION DATE:

12:01AM standard time at the mailing address of the Risk Purchasing Group Member as stated herein.

APPLICABLE LIMITS OF INSURANCE AND PARTICIPATING CARRIERS

TOTAL LIMIT OF COVERAGE:

PARTICIPATING INSURANCE COMPANIES AND LIMITS:

Issuing Companies

Limit

Master Policy

RATING FACTORS

Total Locations:

Total Residential Units:

In-Building Commercial:

Standalone Commercial:

Swimming Pools:

Vacant Land:

Parking:

Total Autos: