

PRODUCER I.M. An Insurance Company One Policy Lane Anytown, USA 00000-0000	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES ABOVE.
	INSURERS AFFORDING COVERAGE
INSURED I.M. Contractor Inc. 111 Worker Lane New York, N.Y. 00001	INSURER A:
	INSURER B:
	INSURER C:
	INSURER D:
INSURER E:	

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED 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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	12345			EACH OCCURRENCE \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire) \$ 100,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED. EXPENSE (Any one person) \$ 10,000
					PERSONAL & ADV. INJURY \$ 2,000,000
					GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS-COMP/OP AGG. \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				
	AUTOMOBILE LIABILITY	34567		SAMPLE FORM	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS				
<input type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
A	EXCESS LIABILITY	98765			EACH OCCURRENCE \$ 3,000,000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$ 3,000,000
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input type="checkbox"/> RETENTION \$				\$
					\$
B	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	456789			WC STATUTORY OTHER LIMITS \$ 1,000,000
					E.L. EACH ACCIDENT \$ 1,000,000
					E.L. DISEASE-EACH EMPLOYEE \$ 1,000,000
					E.L. DISEASE- POLICY LIMIT \$ 1,000,000
	OTHER				\$

DESCRIPTION OF OPERATIONS/ LOCATIONS/ VEHICLES/ EXCLUSIONS ADDED BY ENDORSEMENT/ SPECIAL PROVISIONS

VORNADO REALTY TRUST, VORNADO REALTY L.P., AND EITHER OF THEIR OWNERS AND THEIR OWNED OR WHOLLY OR PARTIALLY CONTROLLED SUBSIDIARIES, DIVISIONS, AFFILIATES, AND/OR JOINT VENTURERS ARE NAMED AS ADDITIONAL INSURED AS THEIR INTEREST MAY APPEAR WITH RESPECT TO GENERAL LIABILITY AND ARE LIMITED TO LIABILITY RESULTING FROM THE NAMED INSURED'S OWNERSHIP AND/OR OPERATIONS. ONLY POLICIES FOR GENERAL LIABILITY, AUTOMOBILE LIABILITY, WORKERS COMPENSATION INCLUDE WAIVER OF SUBROGATION.

CERTIFICATE HOLDER	<input checked="" type="checkbox"/> ADDITIONAL INSURED: INSURER LETTER:	CANCELLATION
VORNADO OFFICE MANAGEMENT LLC TWO PENN PLAZA NEW YORK, N.Y. 10121 ATTN: BUILDING MANAGER		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL XXXXXXXX TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT. XX XX AUTHORIZED REPRESENTATIVE