Policy Number: CK08701723

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE 10/11/2001

PRODUCER
Arnold, Bruce & Doerfler
1405 SW 14th Avenue
PO Box 967
Portland Or 97207
(503)222-1951
007

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 BELOW.

INSURERS AFFORDING COVERAGE

INSURED
CMTS INC.

3207 SW 1ST AV #225
PORTLAND, OR 97201

INSURER A: ST PAUL FIRE & MARINE (Portland)
INSURER B: KEMPER INSURANCE
INSURER C: ADMIRAL INSURANCE COMPANY
INSURER D:
INSURER E:

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [X] POLICY [X] PRO-JECT [ ] LOC	CK08701723 PER FORM CG2012	10/1/2001	10/1/2002	EACH OCCURRENCE FIRE DAMAGE (Any one fire) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 1,000,000 $ 100,000 $ 10,000 $ 1,000,000 $ 2,000,000 $ 2,000,000
A	AUTOMOBILE LIABILITY [X] ANY AUTO [ ] ALL OWNED AUTOS [ ] SCHEDULED AUTOS [ ] HIRED AUTOS [ ] NON-OWNED AUTOS	CK08701723	10/1/2001	10/1/2002	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ 1,000,000 $ $ $
	GARAGE LIABILITY [ ] ANY AUTO				AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY: EA ACC AGG	$ $ $
A	EXCESS LIABILITY [X] OCCUR [ ] CLAIMS MADE [ ] DEDUCTIBLE [X] RETENTION $ 10,000	CK08701723	10/1/2001	10/1/2002	EACH OCCURRENCE AGGREGATE	$ 4,000,000 $ 4,000,000 $ $ $
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	7BG085265-02	7/1/2001	7/1/2002	[X] WC STATUTORY LIMITS [ ] OTHER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ 500,000 $ 500,000 $ 500,000
C	OTHER PROFESSIONAL LIABILTY "CLAIMS MADE"RETRO: 10/1/98	A01PL14129	10/1/2001	10/1/2002	EACH OCCUR AGGREGATE LMT	1,000,000 2,000,000

APPROVED AS TO FORM
Jeffrey L. Rogers
CITY ATTORNEY

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
ALL OPERATIONS OF THE NAMED INSURED SUBJECT TO POLICY TERMS, CONDITIONS AND EXCLUSIONS.

ADDITIONAL INSURED UNDER GENENERAL LIABILITY: CITY OF PORTLAND, ITS AGENTS, OFFICERS AND EMPLOYEES

CERTIFICATE HOLDER [X] ADDITIONAL INSURED; INSURER LETTER: A

CITY OF PORTLAND-BUREAU OF ENVIRONMENTAL
SERVICES - ATTN: SUE WILLIAMS
1211 SW 5TH AV RM 800
PORTLAND OR 97204-7745

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
JOHN G DOERFLER

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