Policy Number: CK08701723

ACORD, CERTIFICATE OF LIABILITY INSURANCE							DATE 10/11/2001	
PRODUCER Arnold, Bruce & I 1405 SW 14th Aver PO Box 967 Portland Or 9720' (503)222-1951			nue	ONLY AN HOLDER.	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.			
		(303)222-1931	007		INSURERS AFFORDING COVERAGE			
INSURED CMTS INC.				INSURER A:				
				INSURER B:	ADMIDAL INCUDANCE COMPANY			
3207 SW 1ST AV #				INSURER C:	INSURER C:			
PORTLAND, OR 972			01	INSURER D:	INSURER D: INSURER E:			
CC	VERAG	ES		INSURER E.				
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)	LIMI		
	GENERA	L LIABILITY				EACH OCCURRENCE	s 1,000,000	
Α	X cor	MMERCIAL GENERAL LIABILITY	CK08701723	10/1/2001	10/1/2002	FIRE DAMAGE (Any one fire)	s 100,000	
		CLAIMS MADE X OCCUR				MED EXP (Any one person)	\$ 10,000	
	<u> </u>		PER FORM CG2012			PERSONAL & ADV INJURY	s 1,000,000	
	₩_		PER FORM CG2012			GENERAL AGGREGATE	\$ 2,000,000 \$ 2,000,000	
	$\sim$	GGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG	\$ 2,000,000	
A	AUTOMO	ICY JECT LOC  BILE LIABILITY  AUTO	CK08701723	10/1/2001	10/1/2002	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000	
		OWNED AUTOS EDULED AUTOS				BODILY INJURY (Per person)	\$	
		ED AUTOS	API	ROVED A	S TO FO	ROWLY INJURY (Per accident)	s	
				fray L.	Roger	PROPARTY DAMAGE	\$	
	GARAGE	LIABILITY				AUTO ONLY - EA ACCIDENT	s	
	ANY	AUTO		CITY AT	TORNEY	OTHER THAN EA ACC AUTO ONLY: AGG	s	
Α	EXCESS	LIABILITY	CK08701723	10/1/2001	10/1/2002	EACH OCCURRENCE	\$ 4,000,000	
	X occ	CUR CLAIMS MADE				AGGREGATE	\$ 4,000,000	
	DEL	DUCTIBLE					\$	
		ENTION \$10,000	2				\$	
	WORKER	RS COMPENSATION AND ERS' LIABILITY	:			WC STATU- OTH-		
В	EWIFLOT	ERS LIABILITY	7BG085265-02	7/1/2001	7/1/2002	E.L. EACH ACCIDENT	\$ 500,000	
						E.L. DISEASE - EA EMPLOYEE	\$ 500,000	
С	OTHER I	PROFESSIONAL	A01PL14129	10/1/2001	10/1/2002	E.L. DISEASE - POLICY LIMIT  EACH OCCUR	1,000,000	
•	LIAB	ILTY "CLAIMS	ROTEHITIZS	10/1/2001	10/1/2002	AGGREGATE LMT	2,000,000	
		"RETRO: 10/1/98						
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 ADDITIONAL INSURED; INSURER LETTER: CANCELLATION								
					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL DAYS WRITTEN			
SERVICES - ATTN: SUE WILLIAMS				*	NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL			
		1211 SW 5TH AV R	M 800	1 .	IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR			
		PORTLAND OR 9720	4-7745	1	REPRESENTATIVES.			
			•		JOHN G DOERFLER			