

MEMORANDUM

To:All TenantsFrom:Property ManagementDate:2022Re:Certificate of Insurance Request
Description of Operations
(Leased Premises):

9805 Katy Freeway, Suite <mark>[your suite]</mark>, Houston, Texas 77024 960 Memorial City Way, Houston, Texas 77024

Please be advised that all **Tenants** are required to provide our office with a current Certificate of Insurance on an **ACORD 25 Form**. The minimum requirements are as follows:

General Liability: Automobile Liability:	\$1,000,000 Combines Single Limit/\$2,000,000 Aggregate \$1,000,000 each occurrence combined single limit for bodily injury and property damage. Evidence should indicate that liability coverage extends to, if applicable, owned, non-owned, scheduled and hired vehicles.
Personal Property/Contents Insurance:	Replacement cost of all improvements, alterations or additions made by Tenant to include Tenant's fixtures, furniture, equipment, inventory and personal property.
Worker's Compensation Insurance:	Statutory limits in an amount not less than \$500,000

All of the above insurance carriers shall have an AM Best Rating of A-VII or higher and shall be registered or authorized to do business in the state of Texas.

Certificate Holder:

Murphy District No. 1, LLC., Murphy District No. 2, LLC., Murphy District No 3, LLC (as tenants in common)., MNC-MB, LLC., Metro National Corporation and Transwestern Property Company SW GP, L.L.C. (<u>must</u> be named as additional insured).

Attach additional insured and waiver of subrogation endorsements to the Certificate of Insurance:

Certificate Holder is additional insured to general liability, auto liability policies as required by the Lease Agreement, Article 12., Insurance; Release; Waiver; Indemnification. A waiver of subrogation is granted to the Certificate Holder with regard to all policies as required by the Lease Agreement, Article 12., Insurance; Release; Waiver; Indemnification. Tenant shall also name Landlord and Certificate Holder as a Loss Payee in regards to Personal Property/Contents Insurance.

The original certificate confirming the above stated coverages must be forwarded to:

Murphy District No. 1, LLC c/o Metro National Corporation 960 Memorial City Way, Suite 300 Houston, Texas 77024

If you have any questions or require additional information, please call our office at 713-722-4800. Thank you for your cooperation.