



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
03/31/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFRS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	Aon Risk Services South, Inc. Charlotte NC Office MSC# 17693 PO Box 551343 Atlanta GA 30355 USA	CONTACT NAME: PHONE (A/C. No. Ext): (866) 283-7122	FAX (A/C. No.): (800) 363-0105
		E-MAIL ADDRESS:	
INSURER(S) AFFORDING COVERAGE			NAIC #
INSURED	INSURER A: LM Insurance Corporation	33600	
CSC Serviceworks, Inc. and All Subsidiaries 35 Pinelawn Road, Ste 120 Melville NY 11747 USA	INSURER B: Liberty Mutual Fire Ins Co	23035	
	INSURER C: Liberty Insurance Corporation	42404	
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES

CERTIFICATE NUMBER: 570111850464

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE		ADDL INSD	SUBR WWD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		Y		EB2651292069025 SIR applies per policy terms & conditions	03/31/2025	03/31/2026	EACH OCCURRENCE	\$1,000,000
								DAMAGE TO RENTED PREMISES (Each occurrence)	\$1,000,000
								MED EXP (Any one person)	Excluded
								PERSONAL & ADV INJURY	\$1,000,000
								GENERAL AGGREGATE	\$2,000,000
								PRODUCTS - COMP/OP AGG	\$2,000,000
B	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY	SCHEDULED AUTOS NON-OWNED AUTOS ONLY			AS2651292069015	03/31/2025	03/31/2026	COMBINED SINGLE LIMIT (Each accident)	\$5,000,000
								BODILY INJURY (Per person)	
								BODILY INJURY (Per accident)	
								PROPERTY DAMAGE (Per accident)	
C	X UMBRELLA LIAB EXCESS LIAB	X OCCUR CLAIMS-MADE			TH7651292069055	03/31/2025	03/31/2026	EACH OCCURRENCE	\$1,000,000
								AGGREGATE	\$1,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input checked="" type="checkbox"/> N	Y/N N/A		WA565D292069125 AOS WC5651292069145 WI	03/31/2025	03/31/2026	X PER STATUTE E.L. EACH ACCIDENT	OTH- ER \$1,000,000
A						03/31/2025	03/31/2026	E.L. DISEASE-EA EMPLOYEE	\$1,000,000
								E.L. DISEASE-POLICY LIMIT	\$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate Holder is included as Additional Insured in accordance with the policy provisions of the General Liability policy.

CERTIFICATE HOLDER

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Aon Risk Services South Inc.

Holder Identifier :

Certificate No : 570111850464



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Ocean Beach Condominium Club I
Attn: President, Board of Directors
3500 Oceanshore Blvd.
Flagler Beach FL 32136 USA



ADDITIONAL REMARKS SCHEDULE

AGENCY Aon Risk Services South, Inc.	NAMED INSURED CSC Serviceworks, Inc. and All	
POLICY NUMBER See Certificate Number: 570111850464		
CARRIER See Certificate Number: 570111850464	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Named Insureds

CSC Serviceworks, Inc.
CSC Serviceworks Holdings, Inc.
Spin Holdco, Inc.
Coinmach Corporation
Coinmach Service LLC
Coinmach Laundry LLC
Appliance Warehouse of America, Inc.
Super Laundry Equipment Corporation
Service Directions Inc.
Mac-Gray LLC
Mac-Gray Services LLC
CSC SW Holdco, Inc.
CSC TEP Co