

MHA PROPERTY AND CASUALTY GROUP, INC.
CERTIFICATE OF INSURANCE

ISSUE DATE: 03/16/2006

INSURED:
 Acton, Town of
 Town Hall, 472 Main Street
 Acton, MA 01720
 Attn: Karen Kucala

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 CONTRACTS BELOW.

THIS IS TO CERTIFY THAT CONTRACTS OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE CONTRACT 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 CONTRACTS DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF SUCH CONTRACTS.

	POLICY NUMBER	CONTRACT EFFECTIVE DATE	CONTRACT EXPIRATION DATE	LIABILITY LIMITS IN THOUSANDS		
GENERAL LIABILITY <input checked="" type="checkbox"/> Comprehensive Form <input type="checkbox"/> Premises, Operations <input type="checkbox"/> Underground Explosion Collapse Hazard <input type="checkbox"/> Products/Completed Operations <input type="checkbox"/> Contractual <input type="checkbox"/> Independent Contractors <input type="checkbox"/> Broad Form Property Damage <input type="checkbox"/> Personal Injury	ACT00002-03-05	07/01/2005	07/01/2006	BODILY INJURY		
				PROPERTY DAMAGE		
				BI & PD COMBINED	\$ 1,000	\$ 3,000
				PERSONAL INJURY		\$ 1,000
				BODILY INJURY		PER PERSON
				BODILY INJURY		PER ACCIDENT
				PROPERTY DAMAGE		
BI & PD COMBINED						
AUTO LIABILITY <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos (Priv.Pass) <input type="checkbox"/> All Owned Autos (Other) <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos <input type="checkbox"/> Garage Liability						
OTHER PUBLIC OFFICIALS	ACT00002-07-05	07/01/2005	07/01/2006	\$1,000,000 occ. \$3,000,000 agg.		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / SPECIAL ITEMS:

THE CERTIFICATE HOLDER HAS BEEN NAMED AS AN ADDITIONAL INSURED AS RESPECTS DUTIES PERFORMED FOR THE TOWN OF ACTON.

CERTIFICATE HOLDER

ACTON COMMUNITY HOUSING CORPORATION
 472 MAIN STREET
 ACTON, MA 01720

CANCELLATION

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

AUTHORIZED REPRESENTATIVE: