

EXHIBIT "C"
INSURANCE REQUIREMENTS - PHASE I & PHASE II

Insurance Amounts

- Workers' Compensations – Statutory Limits.
- Employer's Liability - \$1,000,000. Each block (i.e., "Each Accident", "Disease-Policy Limit", "Disease-Each Employee") shall contain the \$1,000,000 coverage amount.
- Broad Form Comprehensive General Liability - \$3,000,000 – combined single limit
- All employees of Contractor at the property(s) are to be bonded for \$1,000,000.
- Automotive Liability for all owned, non-owned, or hired vehicles - \$1,000,000.
- Professional Liability and Errors and Omissions coverage - \$3,000,000. Coverage will be continuous during the project and for 3 years following completion of the project. Certificates must be sent for the full term of the requirement.

Details of Certificate

1. The Certificate shall include the requirement for thirty (30) days notice of cancellation to the Certificate Holder by the Contractor's insurance company in case the coverage is cancelled or materially changed. The words "endeavor to" in the standard language found in the "Cancellation" block of a standard certificate of insurance MUST BE CROSSED OUT/DELETED AND INITIALED by the insurance company.
2. The certificate shall include and name the following parties as Additional Insureds to the extent of the Contractor's indemnity under this Agreement. Please note that the spelling of these parties must be exactly correct or the insurance is not valid to CBRE, Inc. and will not be allowed to commence.

Water Garden Company, L.L.C.
Water Garden Realty Holdings, L.L.C.
J.P. Morgan Investment Management Inc
CBRE, Inc.

Two Additional Insured Endorsements are required.

1. Owner Indemnified Parties shall to the extent permitted by law be named as additional insureds on ISO form CG20101185 or CG20100704 for ("ongoing operations")
- and-
2. CG20370704 or equivalent for loss arising from Contractor's operations and completed operations for as long as the additional insureds may be exposed to liability arising from Contractor's work ("your work" or "completed operations").

See attached sample.

1. CBRE, Inc., and all related interests, 1620 26th Street, Suite 1015 North, Santa Monica, California 90404 shall be the **Certificate Holder.**
2. The Contractor must sign and return the attached standard form Indemnification/Hold Harmless and Subrogation Letter if no CBRE, Inc. contract has been signed.

NOTE: Original Certificates of Insurance must be provided to CBRE, Inc. before Contractor commences work or work will not be allowed to commence.

POLICY NUMBER: _____ COMMERCIAL GENERAL LIABILITY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY

**ADDITIONAL INSURED --- OWNERS, LESSEES OR
CONTRACTORS (FORM B)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

SCHEDULE

Name of Person or Organization: (NAME OF OWNER and CB) RICHARD ELLIS,
INC.

(If no entry appears above, information required to complete this
endorsement will be shown in the Declaration as applicable to this
endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the
person or organization shown in the Schedule, but only with respect to
liability arising out of "**your work**" for that insured by or for you.

"THE INSURANCE AFFORDED BY THIS POLICY FOR THE ADDITIONAL
INSURED(S) IS PRIMARY INSURANCE AND ANY OTHER INSURANCE
MAINTAINED BY OR AVAILABLE TO THE ADDITIONAL INSURED(S) IS
NON-CONTRIBUTING."

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Exhibit "A"
Insurance Document Requirement Samples

ACORD.	CERTIFICATE OF INSURANCE				ISSUE DATE (MM/DD/YY)
PRODUCER [Insurance broker Name and Address]		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.			
INSURED [Vendor's Name and Address]		COMPANIES AFFORDING COVERAGE			
		COMPANY LETTER A			
		COMPANY LETTER B			
		COMPANY LETTER C			
		COMPANY LETTER D			
		COMPANY LETTER E			
COVERAGES					
THIS IS TO CERTIFY THAT THE POLICIES OF THE 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 EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.					
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
GENERAL LIABILITY					
<input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY	[Policy Number]	[xx/xx/xx]	[xx/xx/xx]	GENERAL AGGREGATE \$ 3,000,000
<input type="checkbox"/>	<input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR.				PRODUCTS-COMP/OP AGG \$ 1,000,000
<input type="checkbox"/>	OWNER'S & CONTRACTOR'S PROT				PERSONAL & ADV. INJURY \$ 3,000,000
<input type="checkbox"/>	INCLUDES PRODUCTS				EACH OCCURRENCE \$ 1,000,000
					FIRE DAMAGE (Any one fire) \$ 50,000
					MED. EXPENSE (Any one person) \$ 5,000
AUTOMOBILE LIABILITY					
<input checked="" type="checkbox"/>	ANY AUTO	[Policy Number]	[xx/xx/xx]	[xx/xx/xx]	COMBINED SINGLE LIMIT \$ 1,000,000
<input type="checkbox"/>	ALL OWNED AUTOS				BODILY INJURY (Per person)
<input type="checkbox"/>	SCHEDULED AUTOS				BODILY INJURY (Per accident)
<input type="checkbox"/>	HIRED AUTOS				PROPERTY DAMAGE \$ 1,000,000
<input type="checkbox"/>	NON-OWNED AUTOS				
<input type="checkbox"/>	GARAGE LIABILITY				
EXCESS LIABILITY					
<input checked="" type="checkbox"/>	UMBRELLA FORM				EACH OCCURRENCE \$ 1,000,000
<input type="checkbox"/>	OTHER THAN UMBRELLA FORM				AGGREGATE
WORKERS COMPENSATION AND EMPLOYER'S LIABILITY					
		[Policy Number]	[xx/xx/xx]	[xx/xx/xx]	<input checked="" type="checkbox"/> STATUTORY LIMITS
					EACH ACCIDENT \$ 1,000,000
					DISEASE-POLICY LIMIT \$ 1,000,000
					DISEASE-EACH EMPLOYEE \$ 1,000,000
OTHER					
	PERSONAL PROPERTY				REPLACEMENT VALUE 100%
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS					
CBRE, Inc., J.P. Morgan Investment Management Inc, Water Garden Company L.L.C.(Phase I) and Water Garden Realty Holding, L.L.C.(Phase II) are named as additional insureds per form CG2010 11/85 Form B or equivalent. (See endorsement attached)					
CERTIFICATE HOLDER			CANCELLATION		
CBRE, Inc. and all related interests 1620 26th St., Suite 1015 North Santa Monica, Ca. 90404			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> 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		