Proposal No. 2024M-009EN-001

ACORD

TANAS-1

OP ID: LN ATE (MWDD7777) 10/14/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS 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.

CERTIFICATE OF LIABILITY INSURANCE

| 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(les) 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). | | | | | | | | | | | |
| PI | MARINE | | | | -466-8951 | CONTACT Julie Silvis | | | | | |
| P | tra Ri | sk Solutions traRiskSolutions.com City Drive S, Ste 1500 | | | l | PHONE 800-466-8951 AX 800-494-6829 | | | | | |
| 77 | 0 The | City Drive S. Ste 1500 | | | ŀ | E-MAL ADDRESS: JulieS@PetraRiskSolutions.com | | | | | |
| U | ange, | CA 32868 | | | | INSURER(S) AFFORDING COVERAGE | | | | | |
| D | ouglas | K. Douthit | | | | MISURER A: Everest National Insurance Co. | | | | | 10120 |
| Н | | | | | | NSURER B : Allied World Assurance | | | | | 19489 |
| Æ | JES | iging Trust LP | | | | | NSURER C: Steadfast Insurance | | | | 26387 |
| ŖĮ | JAR | iging Trust LP T Nashville Lessee, LLC ikkers Alley Hotel Nashville | | | | NSURER C: Steadlast Insurance | | | | | |
| Ta | pestr | Collection by Hilton | | | | NSURER D. Aspen Specialty Insurance Co | | | | | 10717 |
| 22 | 1 2nd | y Collection by Hilton Ave N. le, TN 37201 | | | | INSURER E : Columbia Casualty Company | | | | | 31127 |
| | | | | | | INSURER F: Great American Ins. Co. | | | | | 16691 |
| C | OVER | | | | NUMBER: | | | | REVISION NUMBER: | | |
| THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE SEEN 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. | | | | | | | | | | | |
| in: | | TYPE OF INSURANCE | MAD | SUBR | POLICY NUMBER | | POLICY EFF | (MM/DDCCCCC) | LIMIT | LIMITS | |
| 1 | X | COMMERCIAL GENERAL LIABILITY | | | | | | | EACH OCCURRENCE | \$ | 2,000,000 |
| ı | | CLAIMS-MADE X OCCUR | X | | RM1GL00012-241 | | 01/30/2024 | 01/30/2025 | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ | 1,000,000 |
| ı | X | Contractual Liab | | | | | | | MED EXP (Any one person) | \$ | N/A |
| ı | Х | Terrorism incl | | | | | | | PERSONAL & ADVINJURY | 8 | 1,000,000 |
| ı | GE | NL AGGREGATE LIMIT APPLIES PER: | | | | | | | GENERAL AGGREGATE | \$ | 4,000,000 |
| ı | | POLICY PRO X LOC | | | | | | | PRODUCTS - COMP/OP AGG | 8 | 4,000,000 |
| ı | | OTHER | | | | | | | Emp Ben | 8 | 1,000,000 |
| 7 | AUT | | | | | \neg | | | COMBINED SINGLE LIMIT (Ea accident) | | 3,000,000 |
| ı | X | | | | RM1CA00004-241 | | 01/30/2024 | 01/30/2025 | BODILY INJURY (Per person) | * | |
| ı | - | OWNED SCHEDULED AUTOS | | | | | | | BODILY INJURY (Per accident) | | |
| ı | \vdash | HIRED ONLY NOTES ONLY | | | | | | | PROPERTY DAMAGE (Per accident) | | |
| ı | \vdash | AUTOS ONLY AUTOS ONLY | | | | | | | (Per accident) | | |
| Н | х | UMBRELLA LIAB X OCCUR | | | | | | | ELOU COCUPATIVOE | | 100,000,000 |
| ı | x | EXCESS LIAB CLAIMS-MADE | | | SEE NOTE PAD | | 01/30/2024 | 01/30/2025 | EACH OCCURRENCE | | 100,000,000 |
| ı | ^ | DED X RETENTIONS 10000 | | | | | | | AGGREGATE | 5 | Follow Form |
| Н | wor | DED 18 RETENTIONS | _ | | | | | | PER OTH- | \$ | |
| ı | | RKERS COMPENSATION DEMPLOYERS' LIABILITY Y/N | | | | | | | | _ | |
| ı | OFF | PROPRETORPARTNER/EXECUTIVE ICERA/EMBER EXCLUDED? | N/A | | | | | | E.L. EACH ACCIDENT | \$ | |
| ı | (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | | | E.L. DISEASE - EA EMPLOYEE | \$ | |
| Н | DÉS | CRIPTION OF OPERATIONS below | | | | | | | E.L. DISEASE - POLICY LIMIT | \$ | |
| L | | | | | | | | | | | |
| DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) The Metropolitan Government of Nashville are named as additional insured if required by written contract or written agreement subject to General Liability Blanket Additional Insured Provision. see notepad on page 3 | | | | | | | | | | | |
| С | ERTIF | FICATE HOLDER | | | | CANCELLATION | | | | | |
| METRO17 The Metropolitan Government of Nashville and Davidson County MetroLegal&Claims,InsSafetyDiv 222 3rd Avenue North Ste 501 | | | | | | | 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 | | | | |

Nashville, TN 37201 ACORD 25 (2016/03)

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TANAS-1 PAGE 2 NOTEPAD Date 10/14/2024 OP ID: LM INSURED'S NAME RLJ Lodging Trust LP Excess Liability/Umbrella Coverage - Effective: 01/30/24 to 01/30/25

Allied World Assurance Company A.M. Best: A XV Policy #0309-5702 \$10,000,000 Lead Umbrella

Steadfast Insurance Company A.M. Best: A+ XV Policy # AEC0530759-02 \$15,000,000 excess of \$10,000,000

Aspen Specialty Insurance Company A.M. Best: A XV Policy # CX0005E24 \$15,000,000 p/o \$75,000,000 excess of \$25,000,000

Columbia Casualty Company A.M. Best: A XV Policy # FFX7018252519 \$15,000,000 p/o \$75,000,000 excess of \$25,000,000

Great American Alliance Insurance Company A.M. Best: A+ XV Policy # EXC5202934 \$15,000,000 p/o \$75,000,000 excess of \$25,000,000

Everest Indemnity Ins. Co. A.M. Best: A+ XV
Policy # XC5EX01542-241
\$10,000,000 p/o \$75,000,000 excess of \$25,000,000

Indian Harbor Insurance Company A.M. Best: A+ XV Policy # SXS006074702 \$10,000,000 p/o \$75,000,000 excess of \$25,000,000

Lexington Insurance Company - Boston A.M. Best: A XV Policy # 011170568 \$10,000,000 p/o \$75,000,000 excess of \$25,000,000

Policy cancellation provides 60 days notice of cancellation, except for non-payment of premium, which provides 10 days notice of cancellation.

| | HOLDER CODE METRO17 | TANAS-1 | PAGE 3 |
|--|--|---|-----------------|
| NOTEPAD: | NSURED'S NAME RLJ Lodging Trust LP | OP ID: LM | Date 10/14/2024 |
| RLJ Art Nashv and owner of N, Nashville | rille, LLC ("Licensee"), a Delaware the Bankers Alley Hotel Nashville TN 37201 | limited liability company located at 221 2nd Avenue | |
| License Agree INSTALLATION EXISTING BOTT | ment for Private Encroachment into OF A SMALL ANWING/MARQUEE ABOVE TH L. MARQUEE TO BE SUPPORTED ONLY BY | Public Right of Way: E MAIN ENTRANCE OF THE THE BUILDING AND EXTEND | |
| 1 | (s): TAX MAP 093, PARCEL ID# 093023. | | |
| _ | ss(es): 221 2nd Avenue N, Nashville | | |
| Street numer | ss(es). 221 200 Avenue M, Masuville | , 18 3/201 | |
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LICENSE AGREEMENT FOR PRIVATE ENCROACHMENTS INTO THE PUBLIC RIGHT OF WAY

I/We, _ RLJ Art Nashville, LLC __, in consideration of the Resolution No. _____, to construct, maintain, install and/or operate an encroachment into, onto, over, or under the public right of way located at in Nashville, Davidson County, Tennessee, do hereby, for myself, my agents, customers, and assigns, waive and release and hold harmless The Metropolitan Government of Nashville and Davidson County, its agents, employees, and assigns from any and all claims, rights, or demands for damages that may arise from my/our use, construction and/or maintenance of the encroachment, to wit: (SEE ATTACHED DESCRIPTION OF ENCROACHMENT). I/We hereby certify to the Metropolitan Government of Nashville and Davidson County that I/We have executed a bond or liability insurance policy in such amount as agreed upon by the Director of NDOT and the Metropolitan Attorney, and in the form approved by the Metropolitan Attorney (per Metropolitan Code Section 38-1-1), which operates to indemnify and save The Metropolitan Government of Nashville and Davidson County harmless from all claims or demands that may result to persons or property by reason of the construction, operations or maintenance of the encroachment. I/We further agree that my/our obligations hereunder may not be assigned except upon approval of the Director of NDOT and the Metropolitan Attorney. I/We further acknowledge that any action that results in a failure to maintain said bond or liability insurance for the protection of The Metropolitan Government of Nashville and Davidson County shall operate to the granting of a lien to The Metropolitan Government of Nashville and Davidson County in the amount of the last effective bond/insurance policy. Said insurance or bond may not be cancelable or expirable except on 30 days' notice to the Director of NDOT.

I/We further recognize that the license granted hereby is revocable by The Metropolitan Government upon recommendation of the Director of NDOT and approval by resolution of the Metropolitan County Council if it is determined to be necessary to the public welfare and convenience. In the event the Metropolitan Government revokes this license as contemplated by this paragraph, licensee will not be entitled to any compensation of any kind. This license shall also be strictly subject to the right of way easement owned by The Metropolitan Government. I/We agree to maintain, construct and use the encroachment in such a way as will not interfere with the rights and duties of the Metropolitan Government

as owner of the right of way. Said interference shall be additional grounds for revocation of the license for encroachment. I/We agree to pay the cost of construction, maintenance, use, as well as relocations cost of said encroachment. Licensee's failure to complete construction of the contemplated encroachment within 36 months of the date of approval by the Metropolitan Council will cause this license to terminate automatically. In the event the encroachment contemplated by this license is substantially destroyed, this license shall terminate unless fully restored by licensee within 36 months from the date of such destruction. In the event this license is revoked or terminated for any reason, licensee shall restore all public property to the condition obtaining at the time the license became effective at licensee's sole cost and expense.

RLJ Art Nashville, LLC

(Owner of Property)
221 2nd Avenue N

(Address of Property)

Nashville, TN 37201

(City and State)

STATE OF TENNESSEE)

COUNTY OF DAVIDSON)

Sworn to and subscribed before

Me this 28th day of February, 2024

(NOTARY PUBLIC)

My Commission Expires:

03 08 2026

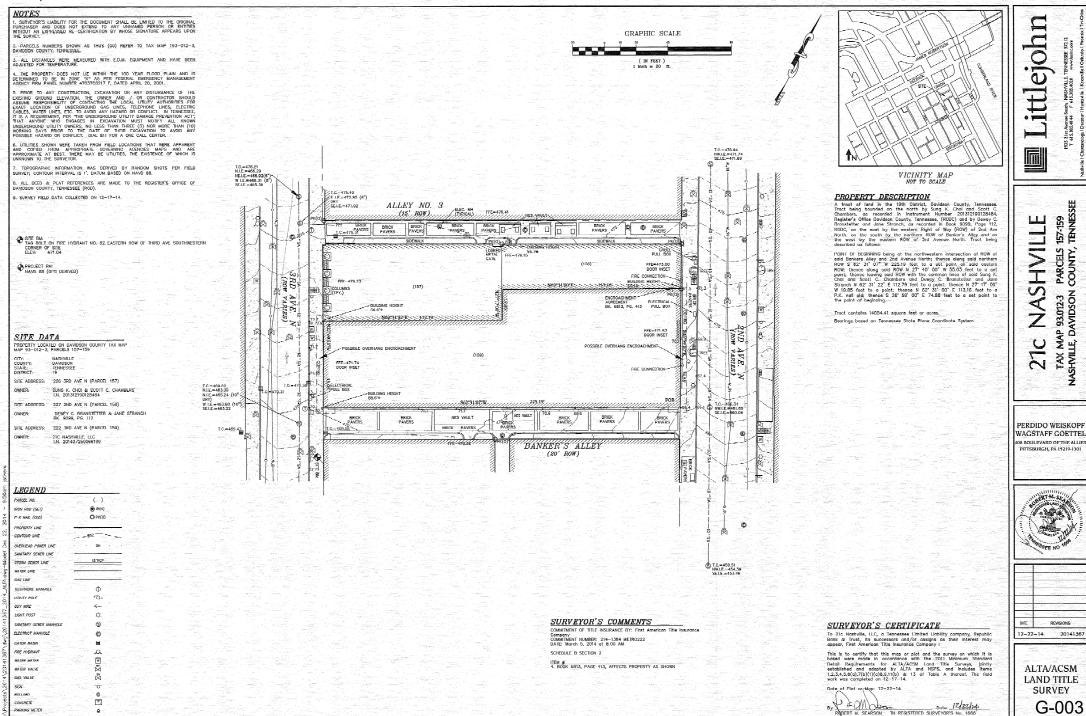


NASHVILLE HOTEL

222 THIRD AVE, NASHVILLE TN

DNOT PRESENTATION 02/08/2024





NASHVILLE HOTEL LAND TITLE SURVEY 02.08.2024 SURVEY

G-003

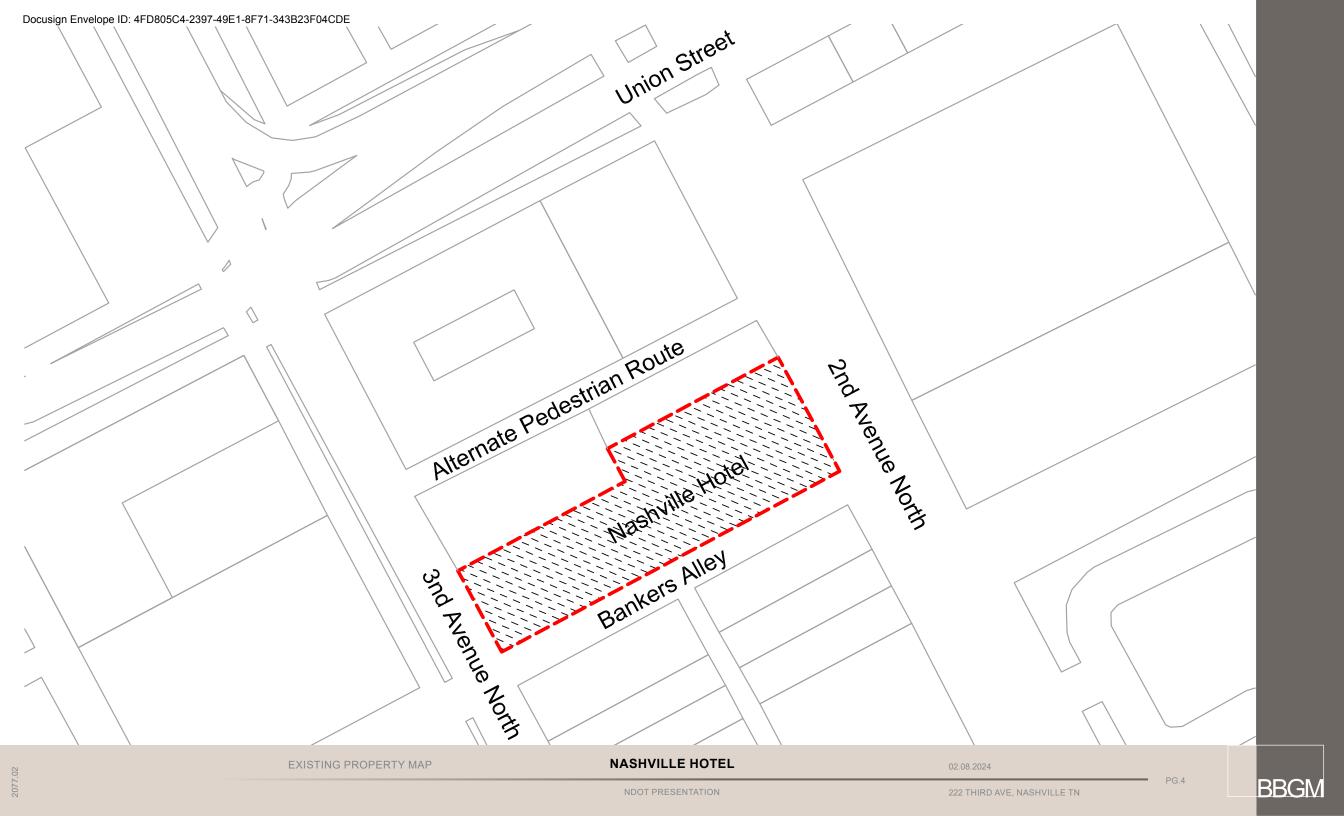
SHVILLE

K

TAX MAI



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EXISTING VIEW FROM 2ND AVENUE NORTH



EXISTING VIEW FACING SOUTH



EXISTING VIEW FACING NORTH



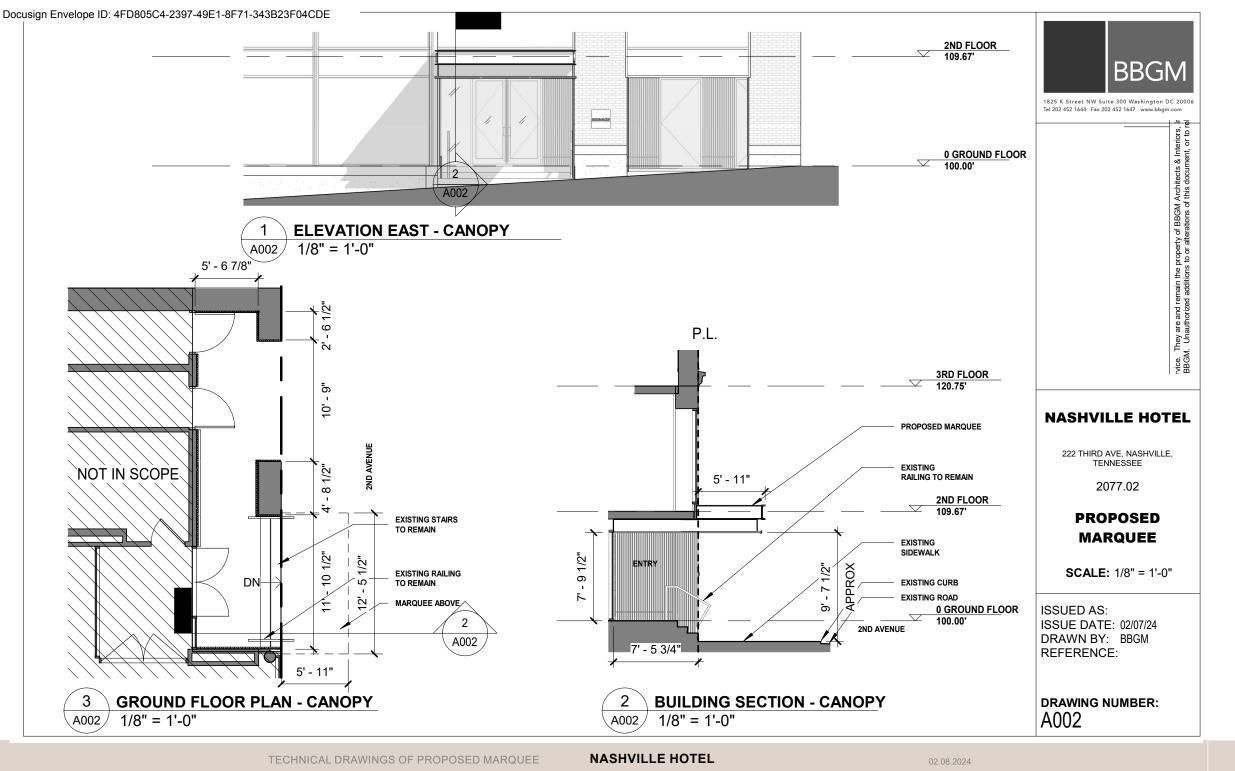
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NDOT PRESENTATION 222 THIRD AVE, NASHVILLE TN



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