CITY OF NEW YORK <u>CERTIFICATION BY INSURANCE BROKER OR AGENT</u>

The undersigned insurance broker or agent represents to the City of New York that the attached Certificate of Insurance is accurate in all material respects.

	[Name of broker or agent (typewritten)]
	[
	[Address of broker or agent (typewritten)]
	[Email address of broker or agent (typewritten)] [Phone number/Fax number of broker or agent (typewritten)] [Signature of authorized official, broker, or agent]
	[Name and title of authorized official, broker, or agent (typewritten)]
State of)) ss.: County of)	
County of)	
Sworn to before me this day of	20