



## EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)  
3/17/2025

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

PRODUCER NAME, CONTACT PERSON AND ADDRESS Hub International Mid-America 6100 S. Yale Avenue Suite 1900 Tulsa, OK 74136  Contact name: Trisha Flora	PHONE (A/C, No, Ext): (800) 375-8631	COMPANY NAME AND ADDRESS Affiliated FM Insurance Company	NAIC NO: 10014
FAX (A/C, No): (918) 747-8619	E-MAIL ADDRESS: Mid-AmericaINFO@HUBINTERNATIONAL.COM	IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH	
CODE: AGENCY CUSTOMER ID #: ROBIPAR-01	SUB CODE: License # 100101891	POLICY TYPE Commercial Property	
NAMED INSURED AND ADDRESS 499 Sheridan Property LLC; 499 Sheridan Investments, LLC; Robinson Park, LLC 204 N Robinson, Ste 700 Oklahoma City, OK 73102	LOAN NUMBER	POLICY NUMBER 1145814	
ADDITIONAL NAMED INSURED(S) BOK Park Plaza LLC	EFFECTIVE DATE 2/1/2025	EXPIRATION DATE 2/1/2026	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:			

PROPERTY INFORMATION (ACORD 101 may be attached if more space is required) ☒ BUILDING OR ☐ BUSINESS PERSONAL PROPERTY

LOCATION / DESCRIPTION Loc # 3, Bldg # 1, 499 W Sheridan Ave, Oklahoma City, OK 73102, Office Tower SEE ATTACHED ACORD 101
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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION	PERILS INSURED	BASIC	BROAD	<input checked="" type="checkbox"/> SPECIAL
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$ 277,745,000	DED: 25,000			
<input checked="" type="checkbox"/> BUSINESS INCOME <input checked="" type="checkbox"/> RENTAL VALUE	YES NO N/A	If YES, LIMIT: 11,000,000 Actual Loss Sustained; # of months: 12		
BLANKET COVERAGE	<input checked="" type="checkbox"/>	If YES, indicate value(s) reported on property identified above: \$		
TERRORISM COVERAGE	<input checked="" type="checkbox"/>	Attach Disclosure Notice / DEC		
IS THERE A TERRORISM-SPECIFIC EXCLUSION?				
IS DOMESTIC TERRORISM EXCLUDED?				
LIMITED FUNGUS COVERAGE	<input checked="" type="checkbox"/>	If YES, LIMIT: DED:		
FUNGUS EXCLUSION (If "YES", specify organization's form used)	<input checked="" type="checkbox"/>	PRO AR 4100 1/23		
REPLACEMENT COST	<input checked="" type="checkbox"/>			
AGREED VALUE		<input checked="" type="checkbox"/>		
COINSURANCE		<input checked="" type="checkbox"/>	If YES, %	
EQUIPMENT BREAKDOWN (If Applicable)	<input checked="" type="checkbox"/>	If YES, LIMIT: 288,745,000	DED: 25,000	
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg		If YES, LIMIT: 288,745,000	DED: 25,000	
- Demolition Costs		If YES, LIMIT: 288,745,000	DED: 25,000	
- Incr. Cost of Construction		If YES, LIMIT: 288,745,000	DED: 25,000	
EARTH MOVEMENT (If Applicable)		If YES, LIMIT: 50,000,000	DED: 100,000	
FLOOD (If Applicable)	<input checked="" type="checkbox"/>	If YES, LIMIT: 50,000,000	DED: 100,000	
WIND / HAIL INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:		If YES, LIMIT: 288,745,000	DED: 500,000	
NAMED STORM INCL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Subject to Different Provisions:		If YES, LIMIT:	DED:	
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS				

## 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.

## ADDITIONAL INTEREST

CONTRACT OF SALE	LENDER'S LOSS PAYABLE	<input checked="" type="checkbox"/> LOSS PAYEE	LENDER SERVICING AGENT NAME AND ADDRESS
MORTGAGEE			
NAME AND ADDRESS The City of Oklahoma City Attn: City Clerk 200 N Walker Ave 2nd Floor Oklahoma City, OK 73102			AUTHORIZED REPRESENTATIVE 

**ADDITIONAL REMARKS SCHEDULE**

AGENCY <b>Hub International Mid-America</b>		License # 100101891	NAMED INSURED 499 Sheridan Property LLC; 499 Sheridan Investments, LLC; Robinson Park, LLC 204 N Robinson, Ste 700 Oklahoma City, OK 73102
POLICY NUMBER <b>1145814</b>			
CARRIER <b>Affiliated FM Insurance Company</b>	NAIC CODE <b>10014</b>	EFFECTIVE DATE: <b>02/01/2025</b>	

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: ACORD 28 FORM TITLE: EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

**Property Information:**

Loc # 3, Bldg # 2, 499 W Sheridan Ave, Oklahoma City, OK 73102, Parking Garage-  
Loc # 4, Bldg # 1, 25 N Hudson Ave, Oklahoma City, OK 73102, Skybridge & Parking

**Special Conditions:**

Regarding the Skybridge located 25 N Hudson, Oklahoma City, OK Additional Insured & WOS in favor of The City of Oklahoma City

This certificate does not amend, extend, or alter the coverage afforded by the policy

Loc: 499 W Sheridan Avenue, Oklahoma City, Oklahoma 73102, USA- office tower and parking garage

Loc: 25 N Hudson Ave, Oklahoma City, OK - parking garage, including Skybridge

**Remarks:**

Water Damage Deductible  
\$100,000