CERTIFICATE OF INSURANCE REQUIREMENTS PRIME US-Reston Square, LLC

Insured: Reston Square 11790 Sunrise Valley Dr. Reston, VA 20191

Required Coverages:

Commercial General Liability (CGL):	\$1,000,000 per Occurrence and \$2,000,000 Aggregate for Bodily Injury, Personal Injury, Property Damage, and Products/Completed Operations, and shall be written on a primary and noncontributory basis over any liability policy carried by OWER, OWNER'S REPRESENTATIVE and PROPERTY MANAGER and include an endorsement clarifying such position if the base policy does not include equivalent language, for all claims or liabilities arising from, or incidental.
Commercial Automobile:	\$1,000,000 each occurrence Liability Insurance combined single limit for bodily injury and property damage. Evidence should indicate that liability coverage evidenced extends to both owned, hired, and non-owned vehicles.
Umbrella Liability:	\$1,000,000 minimum except \$5,000,000 for those services that can be defined as structural, mechanical, roofing, or remediation work. Such insurance shall be in excess of all liability coverage required.
Worker's Compensation:	Statutory Amount. Must include a waiver of subrogation against Owner and Manager.
Employer's Liability:	\$1,000,000 minimum per occurrence in the Aggregate.
Professional Liability Insurance Coverage:	(Architects, Consultants and/or Engineers only): If requested, \$3,000,000 minimum per claim and \$5,000,000 minimum aggregate.
Fidelity Bond (which includes employee dishonesty coverage):	Limits in an amount not less than the Dollar Amount of the Project (Or other if agreed to by Owner) for all employees of Vendor.
	*****This is ONLY required if Vendor is handling, managing, or processing of any of the project's monetary funds for OWNER or for Janitorial or other like services where vendor is inside premises unsupervised during non-business hours. *****

Required Endorsements:

Additional Insured	Additional Insured endorsement to the CGL, Auto and
Endorsement:	<u>Umbrella Liability</u> policies should be provided in favor
	of Owner, Owner's Representative and Manager.
Waiver of Subrogation	Waiver of Subrogation endorsement to the <u>CGL</u> ,
Endorsement:	Worker's Compensation and Employer's Liability
	policies should be provided in favor of Owner,
	Owner's Representative and Manager.
Cancellation Notice:	Policies will include a cancellation clause providing
	that such insurance may not be cancelled, lapsed,
	reduced or materially changed without 30-days written
	notice to the Owner, Owner's Representative and
	Manager.
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Endorsements must read:

"PRIME US-Reston Square, LLC KBS Realty Advisors, Inc. and Transwestern Carey Winston LLC dba Transwestern are named as additionally insured as regards to premises located at Reston Square, 11790 Sunrise Valley Drive, Reston, VA 20191. All rights of subrogation PRIME US-Reston Square, LLC, KBS Realty Advisors, Inc. and Transwestern Carey Winston LLC dba Transwestern are hereby waived."

Certificate Holder must read as follows:

PRIME US-Reston Square, LLC c/o Transwestern Carey Winston, LLC 2303 Dulles Station Blvd. Suite 107 Herndon, VA 20171

Additional insured to be listed as follows:

- 1) PRIME US-Reston Square, LLC
- 2) KBS Realty Advisors, Inc.
- 3) Transwestern Carey Winston, LLC

Email Address for COI:

Samantha. Younger@transwestern.com

Please address the originals to:

Transwestern Carey Winston, LLC 2303 Dulles Station Blvd, Suite 107 Hendon, VA 20171 Attn: Property Manager

All Insurance carriers must have a minimum AM Best rating of A-: VII.

Please forward a copy of these requirements to your Insurance Carrier so they have all the required information.

Policies will include a cancellation clause providing that such insurance may not be cancelled, or lapse, until their expiration or at least 30-days written notice to the Owner and Building Management.

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COMMERCIAL GENERAL LIABILITY THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ CARFULLY.

Policy Number:	

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

Commercial Liability Coverage

Name of Person or Organization:

Schedule

PRIME US-Reston Square, LLC KBS Realty Advisors, Inc. Transwestern Carey Winston, LLC 11790 Sunrise Valley Drive Reston, VA 20191

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

THE TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US – (Condition Section VI – GENERAL LIABILITY CONDITIONS) is amended by the addition of the following:

We waive any right of recovery we may have against the person or organization shown in the schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included. in the "products – operations hazard". This waiver only applies to the person(s) or organization(s) shown in the schedule above.

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COMMERCIAL GENERAL LIABILITY THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ CARFULLY.

Policy	Number:	
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ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS - COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Additional Insured Person(s) or Organization(s)	Location and Description of Completed Operations
PRIME US-Reston Square, LLC KBS Realty Advisors, Inc. Transwestern Carey Winston, LLC	Reston Square 11790 Sunrise Valley Drive Reston, VA 20191
Information required to complete this Schedule, if not sho	wn above, will be shown in the Declarations.

Section II - Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".