



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/03/2020

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.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) 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).

PRODUCER Willis Towers Watson Northeast, Inc. fka Willis of New York, Inc. c/o 26 Century Blvd P.O. Box 305191 Nashville, TN 372305191 USA	CONTACT NAME: Willis Towers Watson Certificate Center PHONE (A/C, No, Ext): 1-877-945-7378 FAX (A/C, No): 1-888-467-2378 E-MAIL ADDRESS: certificates@willis.com	
	INSURER(S) AFFORDING COVERAGE	
INSURED WaveDivision Holdings, LLC 3700 Monte Villa Parkway Bothell, WA 98021 USA	INSURER A: National Fire Insurance Company of Hartford NAIC# 20478	
	INSURER B: Continental Casualty Company NAIC# 20443	
	INSURER C: Market American Insurance Company NAIC# 28932	
	INSURER D: Zurich American Insurance Company NAIC# 16535	
	INSURER E: Valley Forge Insurance Company NAIC# 20508	
	INSURER F:	

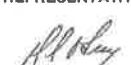
COVERAGES **CERTIFICATE NUMBER:** W15379063 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT 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 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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER:	Y Y	6057236936	02/01/2020	02/01/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY		6072883128	02/01/2020	02/01/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> DED RETENTION \$ 25,000		MKLM6MM70000165	02/01/2020	02/01/2021	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
D	1st Excess Liability		AEC 9546362-00	02/01/2020	02/01/2021	\$15,000,000 xs \$10,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

SEE ATTACHED

CERTIFICATE HOLDER Whatcom County 311 Grand Avenue, Suite 201 Bellingham, WA 98225	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. AUTHORIZED REPRESENTATIVE 
--	--

© 1988-2016 ACORD CORPORATION. All rights reserved.



Amendment to Policy Declarations – Named Insured Endorsement

It is understood and agreed as follows:

The Policy Declarations is amended as follows:

A. Addition of Named Insureds:

The following are added as Named Insureds:

Name and Address of Named Insured
RADIATE HOLDINGS, LP
GRANDE PARENT, LLC
WAVEDIVISION III LLC A WASHINGTON LIMITED LIABILITY COMPANY
WAVE/POWERS ACQUISITION LLC
RCN TELECOM SERVICES OF MASSACHUSETTS, LLC
RCN TELECOM SERVICES OF ILLINOIS, LLC
RADIATE TOPCO, LLC
YANKEE CABLE ACQUISITION, LLC
WAVEDIVISION II LLC A WASHINGTON LIMITED LIABILITY COMPANY
MICHIGAN BROADBAND LLC
ANNE ARUNDEL BROADBAND
WAVE DIVISION HOLDINGS CORPORATION
RCN DIGITAL SERVICES, LLC
WAVEDIVISION IV LLC A WASHINGTON LIMITED LIABILITY COMPANY
WAVE HOLDCO LLC
COASTCOM INC
YANKEE CABLE PARENT, LLC
WAVEDIVISION HOLDINGS LLC
RCN TELECOM SERVICES, LLC





Amendment to Policy Declarations – Named Insured Endorsement

Name and Address of Named Insured
VANOPPEN. BIZ LLC A WASHINGTON LIMITED LIABILITY COMPANY
ASTOUND BROADBAND LLC
WDH CANADA LLC A WASHINGTON LIMITED LIABILITY COMPANY
WAVEDIVISION HOLDINGS LLC A DELAWARE LIMITED LIABILITY COMPANY
CEDAR COMMUNICATIONS LLC A WASHINGTON LIMITED LIABILITY COMPANY
SEATTLES BEST INTERNET LLC A WASHINGTON LIMITED LIABILITY COMPANY
SNI NETWORKS CANADA ULC A BRITISH COLUMBIA UNLIMITED LIABILITY COMPANY
650 COLLEGE RD E STE 3100
PRINCETON, NJ 08540-6629

B. Deletion of **Named Insured**:

The following are deleted as **Named Insureds**:

All other terms and conditions of the Policy remain unchanged.

This endorsement, which forms a part of and is for attachment to the Policy issued by the designated Insurers, takes effect on the effective date of said policy at the hour stated in said Policy, unless another effective date is shown below, and expires concurrently with said Policy.

WILLIS TOWERS WATSON
26 CENTURY BLVD.
6TH FL
NASHVILLE, TN 37214

9569 1 AB 0.416



WHATCOM COUNTY
311 GRAND AVE STE 201
BELLINGHAM, WA 98225-4038

9569