



## **Condominium/Cooperative Brownstone Supplemental**

Insured Name:

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Property Address:

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I/We hereby certify that the property listed above meets the following criteria:

1. At least 90% of units are owner occupied and not rented to others
2. 30 residential units or less – no commercial tenants on the premises
3. Association is governed by Condo or Coop By-Laws
4. No outstanding Brownstone Loss Control Recommendations, upon renewal.
5. No outstanding HPD violations

**Please print your name:**

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**Signature/Date:** \_\_\_\_\_