



28 EDGE HILL RD, WALTHAM, MA 02451  
376A CAMBRIDGE ST, BURLINGTON, MA 01803  
SERVICE@NWPESTCONTROL.COM ★ 781-891-5313



NW Pest Control is a private family owned business, established in 1975 by the Vallerand family.

**Our reputation has been built on providing quality service to our clients.**

Implementing integrated pest management (IPM) practices and utilizing the gathered data is how we can offer that **"Next Level"** of service to our commercial clients.

**We have over four decades of experience working in commercial and industrial settings.**

Including apartment and condo complexes, nursing homes, health care facilities, schools, hotels, restaurants, breweries, food processing facilities, warehouses, office buildings, recreational facilities, demolitions/construction sites and more.

- Eco Friendly/Organic programs available
- Fully Customizable Routine Services  
Weekly, Monthly, Quarterly, Annual,  
Etc.
- Real Estate Termite Inspections
- Rodent Demo and Construction Work  
and Reports
- Wildlife Removal, Chimney Capping,  
Exclusion, Corking, Sealing, Screening  
and Patching Holes for Pest  
Prevention
- Free Insect Identification
- Same Day/Next Day Service during  
Business Hours
- Open Saturdays

## Peabody Properties

Mt. Pleasant Apartments  
Lofts @ 30 Pine  
Pleasant Street Apartments  
135 Lafayette  
St. Aiden's  
Anchor's Weigh  
86 Dummer Apartments  
Lowell Belvidere  
240 Conant  
Mill Pond  
Station 101  
Victory Gardens  
Mercantile Wharf  
Gateway North  
Linwood Mill Apartments  
Whitney Carriage Park  
Fabens Building  
Bedford Green  
Mazur Park  
u 'U  
Metropolitan & Montclair Condos  
Rita Hall  
Saunders School  
Hayes @ Railroad Square  
98 Essex  
Chelsea Village  
Parkway 1208  
North Shore CDC  
25 Amory

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## National Development

Ink Block  
7INK  
Emery Flats  
Oak Row  
e3 Apartments  
Oriole Landing

## Gables Residential

Gables Arsenal  
Katahdin Woods  
Crimson Court  
Hub25

## Brigs LLC

The Woodlands I & II  
Hartwell Farms  
Pepper Hill Estates  
Lincoln Kennedy Condos  
Trouville - Homes at  
Shannon Farm Condos  
Bedfordshire  
Page Place Condos

## Mill Creek Properties

Modera Natick  
Modera Needham  
Modera Framingham  
Modera Medford  
Alister Quincy  
Alister Deco

## Bozzuto Management

Watertown Mews  
The Sylvan  
Meriel Marina Bay  
The Abby

## Panco Management

The Point @ Hudson  
The Point @ 3 North  
The Point @ Merrimack River

## Windsor Communities

Windsor Ridge  
Windsor Village  
Maxwell's Green  
Cambridge Park  
Hopkinton By Windsor  
Vox on 2  
Jack Flats  
Oak Grove  
The Victor

## 8

Green on 9 & 90  
Avenue of Natick  
Avana Weymouth  
Loop83  
Market Central  
Union House  
Zinc  
Everly  
Elan Union Market  
West Village  
Pembroke Woods  
The Washingtons Montaje  
Apartments Miscela  
Radius Apartments  
Heritage at Bedford Springs  
Jefferson @ Dedham Station  
The Cove  
Marquee at Andover  
Lux at Stoughton  
Atmark  
The Preserve at Cohasset  
The Addison  
Serenity  
Velo  
One North Boston I & II  
Mason Everett  
1550 On The Charles

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NWPESTC-01

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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 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 H.J. Knight International 30 Braintree Hill Office Park Braintree, MA 02184	CONTACT NAME: <b>David Greenaway</b> PHONE (A/C, No, Ext): <b>(781) 966-3700</b> E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A: <b>Philadelphia Insurance Companies</b> INSURER B: <b>Star Insurance Company</b> INSURER C: INSURER D: INSURER E: INSURER F:	PHONE (A/C, No): <b>(781) 966-3701</b> NAIC #
INSURED  <b>NW Pest Control Inc.</b> <b>28 Edge Hill Road</b> <b>Waltham, MA 02451</b>		

## COVERAGES

## CERTIFICATE NUMBER:

## 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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <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 checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			<b>BPPKG0684800</b>	<b>1/24/2024</b>	<b>1/24/2025</b>	EACH OCCURRENCE \$ <b>1,000,000</b> DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>100,000</b> MED EXP (Any one person) \$ <b>5,000</b> PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>5,000,000</b> PRODUCTS - COMP/OP AGG \$ <b>5,000,000</b> \$
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS HIRED AUTO <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS			<b>6Z51767</b>	<b>1/24/2024</b>	<b>1/24/2025</b>	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b> BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ <b>10,000</b>			<b>BPFXS0070300</b>	<b>1/24/2024</b>	<b>1/24/2025</b>	EACH OCCURRENCE \$ <b>5,000,000</b> AGGREGATE \$ <b>5,000,000</b> \$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	<b>6H51767</b>	<b>1/24/2024</b>	<b>1/24/2025</b>	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS OTHER E.L. EACH ACCIDENT \$ <b>1,000,000</b> E.L. DISEASE - EA EMPLOYEE \$ <b>1,000,000</b> E.L. DISEASE - POLICY LIMIT \$ <b>1,000,000</b>
A	<b>Pollution Liability</b>			<b>BPPKG0684800</b>	<b>1/24/2024</b>	<b>1/24/2025</b>	Per Occur. <b>1,000,000</b> <b>1,000,000</b>

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

If required by written contract or agreement, the certificate holder is include as an additional insured for general liability per CGL Form CG2010 (07/04), but only with respect to the operations of the named insured.

## CERTIFICATE HOLDER

## 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

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