

L. Moore Property Management Inc.  
14511 SW Westlake Dr.  
Suite 250  
Lake Oswego, Or 97035  
Phone 503-639-4478  
Fax 503-639-0577

---

**L. Moore Property Management, Inc. to be named as "Additional Insured"**

To (Insurance Company): \_\_\_\_\_  
Agent's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Policy #: \_\_\_\_\_  
Name of Insured: \_\_\_\_\_  
Property Address: \_\_\_\_\_

To Whom It May Concern:

Effective immediately and per the signed Property Management Agreement between L. Moore, Inc. and myself, please verify that the policy for the above listed address that is a residential rental property, meets the following requirement:

<p>Insurance:</p> <p>XIII. <b>Insurance.</b> <b>Owner</b> agrees to carry at his/her own expense public liability insurance in an amount not less than one million dollars naming <b>Owner</b> and <b>Manager</b> in a form adequate to protect their interests specifically naming manager as "<b>Additional Insured</b>". A copy of the policy evidencing the existence of such insurance shall be provided to the <b>Manager</b>.</p>
--

We find that some insurance underwriters are naming the "public liability" coverage as "commercial liability" or naming the management company as "interested party"- neither is accurate. The Management Company must be named as "**Additional Insured**". Please send proof of this complete coverage to L. Moore Inc. as soon as possible.

Owner's Name (s): \_\_\_\_\_  
C/O: L. Moore Property Management, Inc.  
14511 SW Westlake Dr. Suite 250  
Lake Oswego, OR 97035

Thank you,

---

Insured's/ Owner's Signature (required)

Date