TO: All Subcontractors doing business with HITT Contracting Inc.

SUBJECT: Insurance Requirements and Performance & Payment Bonds

A. Insurance Requirements:

<table>
<thead>
<tr>
<th>Coverage</th>
<th>HITT Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Liability</td>
<td>$1,000,000 / $2,000,000</td>
</tr>
<tr>
<td>Automobile liability</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Workers Compensation</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Employers’ Liability</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Umbrella Liability</td>
<td>$3,000,000</td>
</tr>
<tr>
<td>Professional Liability (if applicable)</td>
<td>$2,000,000</td>
</tr>
<tr>
<td>Pollution (if applicable)</td>
<td>$2,000,000</td>
</tr>
</tbody>
</table>

- Product Completed Operations coverage required for 5 years post completion
- Insurance requirements apply to lower tier subcontractors
- All Subcontractors are required to carry workers compensation coverage while on any HITT job sites. There will be no exceptions made in reference to coverage including for any Proprietor / Executive Office / Member of the company.

Attached are three samples of Subcontractor Certificates of Insurance for use as reference.

1. General: all Subcontractors without professional or pollution
2. Pollution: all Subcontractors with pollution exposure (hazardous or abatement activities)
3. Professional: all Subcontractors with professional liability exposure (design or engineering activities)

B. Performance & Payment Bonds – When required by the Contract Documents or by HITT, all subcontractors are required to use HITT Contracting Inc. bond forms provided in Exhibit H issued by a corporate surety rated A minus (A-), VII or better by A.M. Best and is included on the Department of Treasury list of approved surety companies

Once you have submitted the Subcontractor Qualifications Questionnaire on our website, please submit your Certificate of Insurance to insurance@hitt-gc.com. If you have any questions, please direct them to me by calling (703) 289-9320.

Sincerely,

Anna Reynolds
Insurance Specialist – Project Accounting

2900 Fairview Park Drive • Falls Church, Virginia 22042 • 703 846 9000 • fax: 703 846 9110 • www.hitt-gc.com
Washington DC • Atlanta • Baltimore • Charleston • Denver • South Florida
Since 1937
CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  01/01/2014

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).

COVERAGE

<table>
<thead>
<tr>
<th>INSURER A:</th>
<th>AM Best A:</th>
<th>VII or Better</th>
</tr>
</thead>
</table>

COVERAGES

<table>
<thead>
<tr>
<th>INSURER</th>
<th>ADDL</th>
<th>WVD</th>
<th>SUBR</th>
<th>NAIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>INSURER A</td>
<td>INSURER B</td>
<td>INSURER C</td>
<td>INSURER D</td>
<td>INSURER E</td>
</tr>
</tbody>
</table>

CONTACT

NAME: [Insert Name]
PHONE (A/C, No, Ext): [Insert Phone Number]
E-MAIL: [Insert Email]
ADDRESS: [Insert Address]
INSURER(S) AFFORDING COVERAGE: [Insert Insurer(s)]
NAIC #: [Insert NAIC Number]

CERTIFICATE NUMBER: [Insert Certificate Number]
REVISION NUMBER: [Insert Revision Number]

HITT Contracting, Inc. is included as additional insured on the above general liability policy for ongoing and completed operations of the named insured contractor via ISO additional insured forms CG 2010 and CG 2037. HITT Contracting, Inc. is also included as additional insured on the above automobile and umbrella policies. Coverage afforded to the additional insured on all policies applies on a primary and non-contributing basis. The general aggregate on the above general liability policy applies on a per-project basis. A waiver of subrogation in favor of the HITT Contracting, Inc. applies on all policies shown above. The above general liability and umbrella policies contain no exclusion for residential construction, including apartment projects.

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

HITT will not make exceptions to Workers Compensation and "N" must be indicated in this box.

CERTIFICATE HOLDER

HITT Contracting, Inc.
2900 Fairview Park Drive
Falls Church, VA 22042

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

Authorized Signature

© 1988-2010 ACORD CORPORATION. All rights reserved.
ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

<table>
<thead>
<tr>
<th>Name Of Additional Insured Person(s) or Organization(s)</th>
<th>Location(s) Of Covered Operations</th>
</tr>
</thead>
</table>
| HITT Contracting, Inc.  
2900 Fairview Park Drive  
Falls Church, VA 22042 |                                   |

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. 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”, “property damage” or “personal and advertising injury” caused, in whole or in part, by:
1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;
in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.
However:
1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:
This insurance does not apply to "bodily injury" or "property damage" occurring after:
1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.
C. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.
ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

<table>
<thead>
<tr>
<th>Name Of Additional Insured Person(s) Or Organization(s)</th>
<th>Location And Description Of Completed Operations</th>
</tr>
</thead>
</table>
| HITT Contracting, Inc.  
2900 Fairview Park Drive  
Falls Church, VA 22042 | |

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. **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".

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance**:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.
CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFRS 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**
Insurance Agency / Broker
City / State Zip

**CERTIFICATE HOLDER**

**INSURED**
Contractor / Subcontractor
City / State Zip

**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.

**CERTIFICATE HOLDER**

HITT Contracting, Inc.
2900 Fairview Park Drive
Falls Church VA 22042

**CANCELLED DATE**

01/01/2014

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES**

(Attach ACORD 101, Additional Remarks Schedule, if more space is required)

**COVERAGES**

<table>
<thead>
<tr>
<th>TYPE OF INSURANCE</th>
<th>INSURER A</th>
<th>INSURER B</th>
<th>INSURER C</th>
<th>INSURER D</th>
<th>INSURER E</th>
<th>INSURER F</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMERCIAL GENERAL LIABILITY</td>
<td>AM Best A : VII or Better</td>
<td>AM Best A : VII or Better</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ANY AUTO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UMBRELLA LIAB</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>POLLUTION LEGAL LIABILITY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**POLICY LIMITS**

<table>
<thead>
<tr>
<th>EACH OCCURRENCE</th>
<th>DAMAGE TOWED PREMISES (Ea occurrence)</th>
<th>MED EXP (Any one person)</th>
<th>PERSONAL &amp; ADV INJURY</th>
<th>GENERAL AGGREGATE</th>
<th>PRODUCTS - COMP/OP AGG</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1,000,000</td>
<td>$300,000</td>
<td>$5,000</td>
<td>$1,000,000</td>
<td>$2,000,000</td>
<td>$2,000,000</td>
</tr>
</tbody>
</table>

**POLICY NUMBER**

01/01/2014 01/01/2015

**CONTACT**

NAME: 
PHONE: (A/C, No, Ext): 
FAX (A/C, No): 
E-MAIL: 
ADDRESS: 

**INSURER(S) AFFORDING COVERAGE**

<table>
<thead>
<tr>
<th>NAIC #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**INSR ADVL WVD SUBR**

<table>
<thead>
<tr>
<th>N/A</th>
</tr>
</thead>
</table>

**COVERAGES CERTIFICATE NUMBER:**

**REVISION NUMBER:**

HITT Contracting, Inc. is included as additional insured on the above general liability policy for ongoing and completed operations of the named insured contractor via ISO additional insured forms CG 2010 and CG 2037. HITT Contracting, Inc. is also included as additional insured on the above automobile, umbrella, and pollution legal liability policies. Coverage afforded to the additional insured on all policies applies on a primary and non-contributing basis. The general aggregate on the above general liability policy applies on a per-project basis. A waiver of subrogation in favor of the HITT Contracting, Inc. applies on all policies shown above. The above general liability and umbrella policies contain no exclusion for residential construction, including apartment projects.

© 1988-2010 ACORD CORPORATION. All rights reserved.

ACORD 25 (2010/05) The ACORD name and logo are registered marks of ACORD
THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

<table>
<thead>
<tr>
<th>Name Of Additional Insured Person(s) Or Organization(s)</th>
<th>Location(s) Of Covered Operations</th>
</tr>
</thead>
</table>
| HITT Contracting, Inc.  
2900 Fairview Park Drive  
Falls Church, VA 22042 |                                  |

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. 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", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.
C. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.
THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

<table>
<thead>
<tr>
<th>Name Of Additional Insured Person(s) Or Organization(s)</th>
<th>Location And Description Of Completed Operations</th>
</tr>
</thead>
</table>
| HIT Contracting, Inc.  
2900 Fairview Park Drive  
Falls Church, VA 22042 | |
| | |

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. 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".

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and

2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.
CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFRMS 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
Insurance Agency / Broker

City / State Zip

INSURED
Contractor / Subcontractor

City / State Zip

COVERAGES

CANCELLATION

DATE (MM/DD/YYYY)
01/01/2014

HITT Contracting, Inc.
2900 Fairview Park Drive
Falls Church VA 22042

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

Authorized Signature

© 1988-2010 ACORD CORPORATION. All rights reserved.

ACORD 25 (2010/05) The ACORD name and logo are registered marks of ACORD
THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

<table>
<thead>
<tr>
<th>Name Of Additional Insured Person(s)</th>
<th>Location(s) Of Covered Operations</th>
</tr>
</thead>
<tbody>
<tr>
<td>HITT Contracting, Inc.</td>
<td></td>
</tr>
<tr>
<td>2900 Fairview Park Drive</td>
<td></td>
</tr>
<tr>
<td>Falls Church, VA 22042</td>
<td></td>
</tr>
</tbody>
</table>

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. 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", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:
1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:
1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.
C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.
ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

<table>
<thead>
<tr>
<th>Name Of Additional Insured Person(s) Or Organization(s)</th>
<th>Location And Description Of Completed Operations</th>
</tr>
</thead>
</table>
| HITT Contracting, Inc.  
2900 Fairview Park Drive  
Falls Church, VA 22042 | |

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. 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".

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and

2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.