

**RENTER'S INSURANCE DECLARATION PAGE REQUIREMENT for  
TUFTS Medical/TUFTS Dental/ChinatownResidents only**

Dear Incoming Resident:

As a kind reminder, you need to today please submit your Renter's Insurance documents covering the minimum liability amount as listed below for the minimum term (i.e., 12-month, etc.) and the exact dates of your leased occupancy (Ex. August 1, 2013 - July 31, 2014 or please achieve dates to overlap with your dates of occupancy.)

At this time feel free to contact the following agencies/persons who may be able to resolve your Renter's Insurance with you. Each resident must secure his/her own policy.

Special Note: the LANGUAGE on the Declaration page must be correct.

On the Declaration page, the following information MUST be correctly listed on the Renter's Insurance document:

1. YOUR FULL NAME;
- 2A. YOUR NEW ADDRESS and UNIT Number;
- 2B. YOUR RENTER'S INSURANCE MUST REFLECT THE EXACT DATES OF LEASE COMMENCEMENT THRU LEASE EXPIRATION (Ex. AUG. 15, 2013-JULY 31, 2014);
3. "TYLER HUDSON LLC" (listed as the Landlord);
4. " TYLER HUDSON LLC " and "HADCO MANAGEMENT LLC" both LISTED AS "ADDITIONAL INSURED" or "ADDITIONAL NAMED INSURED" or "INTERESTED PARTY";
5. Your Landlord's address listed as:  
"(in care of HADCO), 21 DRYDOCK AVENUE, FIRST FLOOR PMB 49, BOSTON, MA 02210";
6. Minimum Liability Coverage totaling not less than U.S. \$100,000.00;

Separately if they have not been submitted to date, include for the Landlord:

7. PHOTOCOPIES OF YOUR CURRENT VALID GOVERNMENT-ISSUED PHOTO I.D.
8. PHOTOCOPIES OF YOUR CURRENT UNIVERSITY-ISSUED PHOTO I.D.

Note, HADCO Management LLC does not represent or warrant the following information, and does not endorse, recommend or require you work through these agencies. This message is for information purposes only. We do recommend you plan accordingly and make your arrangements directly with a renter's insurance provider/agency at your earliest opportunity. You are welcome to work with the agency of your choosing.

\*Please note this is a requirement of the Landlord and is imperative for you to resolve. Other residents who have dealt with these and other agencies have submitted their documents as required by the Landlord without issue. Keys will only be issued when all the proper documents are in order:

Kristie Buccieri, Personal Lines Account Representative  
Samel Insurance Agency, Inc.  
15 Central Street  
Andover, MA 01810  
(978) 474-0810 (t)  
(978) 474-0890 (f)

Assurant.com

American Bankers

Fidelity.com

StateFarm.com

Geico.com

State Fund Insurance

100 Summer Street 16th Floor Boston MA 02110

Phone: 800-241-1151 ext 827

617-956-9999

Fax: (866) 578-9866

In review, upon receipt of your Renter's Insurance coverage transaction, please:

- 1.) **FAX only the Declaration Page (not the entire policy)** to FAX +1 617-443-9494, **OR**
- 2.) **EMAIL your original Renter's Insurance Declaration page** (not the entire policy) to the office of the Landlord.

All mail sent to HADCO's office must be addressed as:

HADCO

21 Drydock Avenue, First Floor, PMB # 49

Boston MA 02210

So, to recap:

1. Renter's Insurance per individual with **YOU named as the insured party** (married couples may have ONE policy; singles must have TWO SEPARATE policies)

2. **Interested Party listed as both:**

**TYLER HUDSON LLC**

21 DRYDOCK AVENUE, PMB 49

BOSTON, MA 02210

**\*AND\***

**HADCO MANAGEMENT LLC**

21 DRYDOCK AVENUE, PMB 49

BOSTON, MA 02210

3. **YOUR insured address** listed as:

YOUR NEW ADDRESS and UNIT Number

BOSTON, MA 02111

4. **US \$100,000.00 Minimum Liability COVERAGE**