

ANNEX X

CERTIFICATE OF INSURANCE	Date of issue			
	August 30, 2021			
This certificate is confirmation that the insured holds a valid insurance policy, in according	rdance with the particulars			
appearing therein. The information contained in this certificate does not include all of the terms, conditions and				
exclusions of the policy. Nonetheless, in the event of any discrepancy between the conditions appearing in this certificate				
and the conditions appearing in the insurance policy - that stated in the insurance policy will prevail other than in a case				
where the conditions of this certificate improve the situation of the party applying for the certificate (hereinafter: "the				
Applicant").				

The Applicant	The Insured	Nature of Business	Status of the Applicant
Name:	Name	□Realestate	□Landlord
Name	Bird Riders Ltd	□Services	□Tenant
Caesarea		☐Supply of Products	□Franchise
Development		⊠Other: Authorization to	□Subcontractors
Company Edmund		load and repair	□Client (Services)
Benjamin de Rothschild Ltd. and /		scooters in the	☐Client (Products)
or Caesarea Fund		Caesarea Industrial and	□Other:
Edmund Benjamin de		Business Park	
Rothschild and / or			
Caesarea Assets			
Company Edmund			
Benjamin de			
Rothschild (2001)			
Ltd. and / or parent			
companies and / or subsidiaries and / or			
subsidiaries And / or			
affiliates and / or			
affiliates and / or the			
management			
company			
I.D. number / company	I.D. number / company		
no.	no.		
510107378			
510370430			
513082321			
Address:	Address:		

Covers								
Sections of the policy	Policy no.	Policy wording	Inception Expiry Limits of liability / date date sums insured		Other valid covers / extensions			
Breakdown between limits of liability or sums insured		and edition			Amount	Currency	(Please state the cover code)	
Property						Nis	Waiver of the right of subrogation in favour of the Applicant	
Consequential loss								
							Natural perils cover	
							Cover for burglary, robbery and theft	



Covers			
		Earthqua	ke cover
Third Party Liability	4,000,000	- Contra subcontra Cover for Insurance subrogate Addition in respect or omisss insured - Applicant Applicant defined in party un section)	extension ctors and actors or National e Institute ion claims all insureds at of errors ions by the the tisto be as a third der this oerty of the tishall be
		party pro	ed as third operty
Employers Liability	20,000,000	if and wh	ed as an of any of ed's

Service Details (subject to the services specified in the agreement between the insured and the Applicant):

Maintenance and logistics services
Maintenance services

Cancellation / amendment to the policy

Zurich American Insurance Company will endeavor to send notice to the Applicant 30 days prior to Policy cancellation subject to the terms and conditions set forth in the Policy.

Signature	
The insurer:	
<u>Gared Swender</u>	
Jared Suender	
Assistant Vice President	
Zurich American Insurance Company	