



EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)
11/03/2025

THIS EVIDENCE OF COMMERCIAL PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

PRODUCER NAME, CONTACT PERSON AND ADDRESS Aon Risk Services Northeast, Inc. New York NY Office One Liberty Plaza 165 Broadway, Suite 3201 New York NY 10006 USA		PHONE (A/C, NO, Ext): (866) 283-7122	COMPANY NAME AND ADDRESS Allianz Global Risks US Insurance Co. 3475 Piedmont Rd. NE Suite 900 Atlanta GA 30305-1707 USA		NAIC NO: 35300
FAX - (A/C, No): (800) 363-0105		E-MAIL ADDRESS:		IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH	
CODE:		SUB CODE:		POLICY TYPE Commercial Property	
AGENCY CUSTOMER ID #: 570000101135		LOAN NUMBER		POLICY NUMBER USP00264425	
NAMED INSURED AND ADDRESS Solstice Advanced Materials Inc. 115 Tabor Rd Morris Plains NJ 07950 USA		EFFECTIVE DATE 10/30/2025		EXPIRATION DATE 10/30/2026	CONTINUED UNTIL TERMINATED IF CHECKED ☐
ADDITIONAL NAMED INSURED(S)		THIS REPLACES PRIOR EVIDENCE DATED:			
PROPERTY INFORMATION (ACORD 101 may be attached if more space is required) ☒ BUILDING OR ☒ BUSINESS PERSONAL PROPERTY					

LOCATION/DESCRIPTION

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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION		PERILS INSURED	BASIC	BROAD	X	SPECIAL	
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$50,000,000		Loss Limit		DED:			
☒ BUSINESS INCOME	☐ RENTAL VALUE	YES	NO	N/A	If YES, LIMIT: \$50,000,000 Actual Loss Sustained; # of months:		
BLANKET COVERAGE		X			If YES, indicate value(s) reported on property identified above Included		
TERRORISM COVERAGE			X		Attach signed Disclosure Notice / DEC		
IS THERE A TERRORISM-SPECIFIC EXCLUSION?				X			
IS DOMESTIC TERRORISM EXCLUDED?				X			
LIMITED FUNGUS COVERAGE					If YES, LIMIT: DED:		
FUNGUS EXCLUSION (If "YES", specify organization's form used)							
REPLACEMENT COST		X					
AGREED AMOUNT		X			Expiration Date: 10/30/2026		
COINSURANCE			X		If YES, %		
EQUIPMENT BREAKDOWN (If Applicable)		X			If YES, LIMIT: \$50,000,000 DED:		
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg		X			If YES, LIMIT: \$50,000,000 DED:		
- Demolition Costs		X			If YES, LIMIT: \$50,000,000 DED:		
- Incr. Cost of Construction		X			If YES, LIMIT: \$50,000,000 DED:		
EARTH MOVEMENT (If Applicable)		X			If YES, LIMIT: See Attached DED:		
FLOOD (If Applicable)		X			If YES, LIMIT: See Attached DED:		
WIND / HAIL INCL ☒ YES ☐ NO Subject to Different Provisions:					If YES, LIMIT: Included DED:		
NAMED STORM INCL ☒ YES ☐ NO Subject to Different Provisions:					If YES, LIMIT: \$50,000,000 DED:		
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS		X					

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.

ADDITIONAL INTEREST

CONTRACT OF SALE	LENDER'S LOSS PAYABLE	LOSS PAYEE	LENDER SERVICING AGENT NAME AND ADDRESS
MORTGAGEE			
NAME AND ADDRESS Solstice Advanced Materials Inc. 115 Tabor Rd Morris Plains NJ 07950 USA			AUTHORIZED REPRESENTATIVE <i>Aon Risk Services Northeast Inc.</i>

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**ADDITIONAL REMARKS SCHEDULE**

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AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED Solstice Advanced Materials Inc.
POLICY NUMBER See Certificate Number: 570116507603		
CARRIER See Certificate Number: 570116507603	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** ACORD 28 **FORM TITLE:** Evidence of Commercial Property Insurance

Sublimits

Rental Income - \$50,000,000
 Extended Period of Indemnity - 365 Days

Earthquake
 \$50,000,000- in the Annual Aggregate but not to exceed the following limits in the Annual Aggregate:
 \$50,000,000- for Locations in California
 \$50,000,000 Locations in Taiwan
 \$50,000,000 for Locations in Japan

Flood
 \$50,000,000- in the Annual Aggregate but not to exceed the following limits in the Annual Aggregate
 \$50,000,000- for Locations in Thailand.

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Participants

Policy PTNAM2516615
Lloyd's Syndicate 1183, Lloyd's Syndicate 0033

Policy- USP00264425
Carrier-Allianz Global Risks US Insurance Company

Policy - GPAN11113710001
Carrier- ACE American Insurance Company

Policy - 25SSLDOND340311
Carrier - Starr Surplus Lines Insurance Company

Policy - ARP30100961300
Carrier - Endurance American Specialty Insurance Company

Policy - P103777001
Allied World Assurance Company, Ltd.

Policy BPD30000716800
Endurance Specialty Insurance Ltd

Policy - LSMAEN528826A
Liberty Specialty Markets Bermuda Limited

Policy - RMP8034767870
Columbia Casualty Company

Policy - PTNAM2516616
Lloyd's Syndicate 1886, Lloyd's Syndicate 2015, Lloyd's Syndicate 1618, Lloyd's Syndicate 4711,
Lloyd's Syndicate 2623, Lloyd's Syndicate 623, Lloyd's Syndicate 5555, Lloyd's Syndicate 5000,
Lloyd's Syndicate 5555, Lloyd's Syndicate 4472, Lloyd's Syndicate 1458, Lloyd's Syndicate 5623,
Lloyd's Syndicate 0510, Lloyd's Syndicate 1955, Lloyd's Syndicate 2232, Lloyd's Syndicate 4444,
Lloyd's Syndicate 1686, Lloyd's Syndicate 2001, Lloyd's Syndicate 3000



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CARRIER See Certificate Number: 570116507603	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

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FORM NUMBER: ACORD 28 **FORM TITLE:** Evidence of Commercial Property Insurance

Participants

Policy - B6044000RURS05025
Carrier - Lloyd's Syndicate 1183

Policy - FIR1122868
Carrier - Mitsui Sumitomo Insurance Company of America

Policy - PTNAM2526527
Participants - PartnerRe Ireland Insurance dac, Lloyd's Syndicate 5555, Lloyd's Syndicate 4472, Lloyd's Syndicate 1458, Lloyd's Syndicate 5623, Lloyd's Syndicate 0510, Lloyd's Syndicate 1955, Lloyd's Syndicate 2232, Lloyd's Syndicate 4444, Lloyd's Syndicate 1686, Lloyd's Syndicate 2001, Lloyd's Syndicate 3000

Policy - PTNAM2516591
Scor UK Company Ltd, Lloyd's Syndicate 5555, Lloyd's Syndicate 4472, Lloyd's Syndicate 1458, Lloyd's Syndicate 5623, Lloyd's Syndicate 0510, Lloyd's Syndicate 1955, Lloyd's Syndicate 2232, Lloyd's Syndicate 4444, Lloyd's Syndicate 1686, Lloyd's Syndicate 2001, Lloyd's Syndicate 3000

Policy - PTNAM2516596
Helvetia Global Solutions Ltd, Lloyd's Syndicate 5555, Lloyd's Syndicate 4472, Lloyd's Syndicate 1458, Lloyd's Syndicate 5623, Lloyd's Syndicate 0510, Lloyd's Syndicate 1955, Lloyd's Syndicate 2232, Lloyd's Syndicate 4444, Lloyd's Syndicate 1686, Lloyd's Syndicate 2001, Lloyd's Syndicate 3000

Policy - PTNAM2516597
Aviva Insurance Limited, Lloyd's Syndicate 5555, Lloyd's Syndicate 4472, Lloyd's Syndicate 1458, Lloyd's Syndicate 5623, Lloyd's Syndicate 0510, Lloyd's Syndicate 1955, Lloyd's Syndicate 2232, Lloyd's Syndicate 4444, Lloyd's Syndicate 1686, Lloyd's Syndicate 2001, Lloyd's Syndicate 3000

Policy - OGR054352300
Zurich American Insurance Company

Policy - US00158862PR25A
XL Insurance America, Inc.

As Respects policy numbers P103777001, BPD30000716800, and LSMAEN528826A, Aon Commercial Risk (U.S.) is generating and distributing this certificate in an administrative capacity. Aon Bermuda is the broker of the defined policies.