

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 06/13/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS 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.

KEI KEGERIARITE GREEK RODGGER, AND THE GERTIN	.0,						
PRODUCER			CONTACT NAME:	Balsiger Insurance			
Balsiger Insurance			PHONE (A/C, No, Ext):	(702) 220-8640	FAX (A/C, No):	(866) 8	365-2046
3481 E. Sunset Rd			E-MAIL ADDRESS:	servicerequest@balsigerinsurance.com			
Suite 100			PRODUCER CUSTOMER II	D: 00030497			
Las Vegas	NV	89120		INSURER(S) AFFORDING COVERAGE			NAIC#
INSURED			INSURER A:	Mesa Underwriters Specialty Insurance 0	Company		
Los Nogales Condo Association			INSURER B:	Great American Alliance Ins Co			
4331 Dickason #201			INSURER C :	Underwriters at Lloyd's London			
			INSURER D :				
Dallas	TX	75219	INSURER E :				
			INSURER F:				

COVERAGES CERTIFICATE NUMBER: CP2261305048 REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

THIS IS TO CERTIFY THAT 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 CERTIFICATE 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.

INSR LTR	TYPE OF IN	ISURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)			COVERED PROPERTY	LIMITS	
	PROPERTY						BUILDING	\$	
	CAUSES OF LOSS DEDUCTIBLES BASIC BUILDING \$5,000						PERSONAL PROPERTY	\$	
							BUSINESS INCOME	\$	
	BROAD	CONTENTS	-				EXTRA EXPENSE	\$	
	➤ SPECIAL	\$5,000			06/15/2023		RENTAL VALUE	\$	
	EARTHQUAKE		MD044204400004000	06/15/2022		×	BLANKET BUILDING	\$ 3,348,240	
A	X WIND	2%	MP011201100004902	06/13/2022		×	BLANKET PERS PROP	\$ 110,000	
	FLOOD		1				BLANKET BLDG & PP	\$	
	Repl. Cost		1			×	Ord/Law Cov A	\$ Included	
	➤ 90% Colns		1			×	ord/Law Cov B&C	\$ 100,000	
	INLAND MARIN	E	TYPE OF POLICY					\$	
	CAUSES OF LOSS							\$	
	NAMED PERILS		POLICY NUMBER					\$	
								\$	
	CRIME					×	Limit	\$ 50,000	
В	TYPE OF POLICY		SSA-392-56-74-10705-02	06/15/2022	06/15/2023	×	Deductible	\$ 1,000	
	Employee Theft / Fidelity					×	Mgr & Mgmt Co are	\$ also an Insured	
Α	BOILER & MACHINERY / EQUIPMENT BREAKDOWN				06/15/2023	×	Included	\$	
^					00/10/2023		1	\$	
С	Wind Deductible Buy Back Policy		tible Buy Back Policy 22N30873AA0P8 06/15/2022		06/15/2023	×	Limit	\$ 34,608	
			221130013AA0F0	00/15/2022	00/13/2023	×	Retention	\$ 1% per Occurence	

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

***	FVIDENCE	OF	INSUR	ANCE	***

Coverage is Walls In, Original Construction with NO coverage for Betterments or Improvements.

Lenders: Please go to www.icerts.com to obtain your COIs.

CERTIFICATE HOLDER	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
	Katileen Ross

³² Units



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/13/2022

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IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or 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).

tr	is certificate does not confer rights to	tne c	ertiti	cate noider in lieu of sucr						
PRODUCER					CONTACT NAME: Balsiger Insurance					
Balsiger Insurance						PHONE (702) 220-8640 FAX (866) 865-2046				
3481 E. Sunset Rd						E-MAIL convicersqueet@beleigeringurence.com				
					ADDRESS:					
Suite 100						INSURER(S) AFFORDING COVERAGE				NAIC#
-	Vegas			NV 89120	INSURE		Specialty Insu			26808
INSU	RED				INSURER B: Allied World Insurance Company					
	Los Nogales Condo Association				INSURE	Rc: Pennsylv	/ania Manufact	urers' Association Ins Co		
	4331 Dickason #201				INSURER D: Great American Ins Co					
					INSURER E :					
	Dallas			TX 75219						
<u></u>		TIFIC			INSURE	KF:		DEVICION NUMBER.		
						TO THE INCHE		REVISION NUMBER:	100	
	IS IS TO CERTIFY THAT THE POLICIES OF DICATED. NOTWITHSTANDING ANY REQUI									
	ERTIFICATE MAY BE ISSUED OR MAY PERT		,							
	CLUSIONS AND CONDITIONS OF SUCH PC								•	
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
	COMMERCIAL GENERAL LIABILITY	IIVOD	WVD			(MINI/DD/1111)	(MINI/DD/1111)	EACH OCCURRENCE	\$ 1,00	0.000
								DAMAGE TO RENTED	400	
	CLAIMS-MADE OCCUR							PREMISES (Ea occurrence)	φ	
١.								MED EXP (Any one person)	\$ 5,00	
Α				G42422291-2		06/15/2022	06/15/2023	PERSONAL & ADV INJURY	\$ 1,00	0,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,00	0,000
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,00	0,000
	OTHER: Separation of Insureds								\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	\$ 1,00	0.000
	ANY AUTO						00/45/0000	(Ea accident) BODILY INJURY (Per person)	\$	-,
١,	OWNED SCHEDULED			0.40.400004.0		00/45/0000				
Α	AUTOS ONLY AUTOS		G42422291-2		06/15/2022	06/15/2023	BODILY INJURY (Per accident) PROPERTY DAMAGE	\$		
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							(Per accident)	\$	
									\$	
	▼ UMBRELLA LIAB ▼ OCCUR							EACH OCCURRENCE	\$ 5,00	0,000
В	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$ 5,00	0,000
								AOOREOATE	-	
	DED RETENTION \$ UWORKERS COMPENSATION							➤ PER OTH-ER	\$	
	AND EMPLOYERS' LIABILITY Y/N							STATUTE ER	1.00	0.000
С	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	7		PENDING		06/15/2022	06/15/2023	E.L. EACH ACCIDENT	φ .	0,000
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	Ψ	0,000	
If yes, describe under DESCRIPTION OF OPERATIONS below								E.L. DISEASE - POLICY LIMIT	\$ 1,00	0,000
	Directors & Officers							Limit	\$1,0	00,000
D	Directors & Officers			EPPE457777-02		06/15/2022	06/15/2023	Deductible	\$2,5	00
DES	L CRIPTION OF OPERATIONS / LOCATIONS / VEHICLI	S (AC	OPD 1	01 Additional Pemarks Schedule	may he a	ttached if more sr	nace is required)		<u> </u>	
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CEI	RTIFICATE HOLDER				CANU	ELLATION				
l					SHO	III D ANY OF T	HE AROVE DE	SCRIBED POLICIES BE CAN	ICELLE	REFORE
l								NOTICE WILL BE DELIVER		JLI OIL

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Kathleen Ross

ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE