

JMADERA



CERTIFICATE OF LIABILITY INSURANCE

3/20/2025

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.

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).

PRODUCER License # 0M10410	CONTACT NAME:					
Armstrong/Robitaille/Riegle Business and Insurance Solutions 18575 Jamboree Rd, Ste 500	PHONE (A/C, No, Ext): (949) 381-7700 FAX (A/C, No): (949) 8	361-9429				
Irvine, CA 92612-2545	E-MAIL ADDRESS: arrinfo@aleragroup.com					
	INSURER(S) AFFORDING COVERAGE	NAIC#				
	INSURER A: Accelerant National Insurance Company	10220				
INSURED	INSURER B : Federal Insurance Company 2					
Laing's 1st Edition - Ontario	INSURER C: Pennsylvania Manufacturers Ins. Indemnity Co.	12262				
c/o TESS Property Management 160 W. Foothill Pkwy Suite 105-34	INSURER D : Accredited Surety and Casualty Company, Inc.	26379				
Corona, CA 92882	INSURER E:					
	INSURER F:					

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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 INSURANCE	ADDL INSD	SUBR		POLICY EFF	POLICY EXP	LIMIT	s	
Α	Х	COMMERCIAL GENERAL LIABILITY				(, <u>,</u>	EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR			N030PK1433-02	4/10/2025	4/10/2026	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
								MED EXP (Any one person)	\$	5,000
								PERSONAL & ADV INJURY	\$	1,000,000
	GEN	I'L AGGRE <u>GAT</u> E LIMIT AP <u>PLIE</u> S PER:						GENERAL AGGREGATE	\$	2,000,000
		POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000
		OTHER:							\$	
Α	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
		ANY AUTO			N030PK1433-02	4/10/2025	4/10/2026	BODILY INJURY (Per person)	\$	
		OWNED SCHEDULED AUTOS AUTOS						BODILY INJURY (Per accident)	\$	
	X	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
									\$	
В	X	UMBRELLA LIAB X OCCUR				0A 4/10/2025	4/10/2026	EACH OCCURRENCE	\$	5,000,000
		EXCESS LIAB CLAIMS-MADE			G7471500A			AGGREGATE	\$	5,000,000
		DED X RETENTION\$							\$	
С	WOF	KERS COMPENSATION EMPLOYERS' LIABILITY						X PER OTH- STATUTE ER		
		PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N/A		2025010552752Y	4/10/2025	4/10/2026	E.L. EACH ACCIDENT	\$	1,000,000
	(Mar	idatory in NH)	IV. A					E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
		s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
D		ectors & Officers			ТВА	4/10/2025	1	\$5,000 Deductible		1,000,000
С	Crin	ne			4125010552752Y	4/10/2025	4/10/2026	\$5,000 Deductible		1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
A: Blanket Building / Special Form / Guaranteed Replacement Cost - Policy #N030PK1433-02 - Effective: 4/10/2025- 4/10/2026 - \$100,013,000 Limit used for rating purposes only - \$25,000 Deductible Per Unit; Association consists of 297 Units; "Walls-In" including Betterments and Improvements, Ordinance & Law, Equipment Breakdown, Severability of interest, common area elements are included. No inflation guard. No Coinsurance.

Property Management company is named as Additional Insured with respects to General Liability and Directors and Officer Liability. Theft or embezzlement of

Association funds by a Property Manager is a covered event.

CERTIFICATE HOLDER	CANCELLATION				
EVIDENCE OF COVERAGE	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 Alla Mulius				

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INSURER B : Federal Insurance Company 2028						
INSURER C: Pennsylvania Manufacturers Ins. Indemnity Co. 122						
INSURER D : Accredited Surety and Casualty Company, Inc.	26379					
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160 W. Foothill Pkwy Ste 105-34 Corona, CA 92882

AUTHORIZED REPRESENTATIVE

Alber Melin