

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 11/09/2021

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.

PRODUCER				CONTACT NAME:	Dennis Mudd		
State Farm	Dennis Mudd		PHONE (A/C, No, Ext)	(602) 992-0540	FAX (A/C, No): (602)	222-8546	
	5350 N 16th St Ste 100			E-MAIL ADDRESS: dennis.mudd.bzxc@statefarm.com			
				PRODUCER CUSTOMER II	D:		
	Phoenix,	ΑZ	85016-3213		INSURER(S) AFFORDING COVERAGE		NAIC#
INSURED _				INSURER A :	State Farm Fire and Casualty Compa	any	25143
Fountain Court Homeowners Assn				INSURER B:			
C/O Vision Community Management 16625 S Desert Foothills Pkwy				INSURER C:			
	-			INSURER D :			
Dh	hoenix, AZ 85048			INSURER E :			
	2001II, AZ 05040	,040		INSURER F:			

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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

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.

SR FR	TYPE OF IN	SURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)		COVERED PROPERTY	LIMITS
	PROPERTY					X	BUILDING	\$ \$160,900
	CAUSES OF LOSS	DEDUCTIBLES					PERSONAL PROPERTY	\$
	BASIC	BUILDING - \$500					BUSINESS INCOME	\$ SEE ACORD 101
	BROAD	CONTENTS	_				EXTRA EXPENSE	\$ SEE ACORD 101
\geq	SPECIAL	1					RENTAL VALUE	\$ SEE ACORD 101
	EARTHQUAKE		02 10 5256 0	06/10/2021	06/19/2022		BLANKET BUILDING	\$
	WIND		93-19-5356-9	06/19/2021	00/19/2022		BLANKET PERS PROP	\$
	FLOOD						BLANKET BLDG & PP	\$
								\$
								\$
	INLAND MARINE		TYPE OF POLICY					\$
	CAUSES OF LOSS							\$
	NAMED PERILS		POLICY NUMBER					\$
								\$
	CRIME							\$
Т	YPE OF POLICY							\$
								\$
	BOILER & MACH							\$
	EQUIPMENT BR	EAKDOWN						\$
								\$
								\$

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

CERTIFICATE HOLDER		CANCELLATION
Vision Community Management 16625 S Desert Foothills Pkwy		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Phoenix	AZ 85048	AUTHORIZED REPRESENTATIVE IF SIGNATURE IS REQUIRED, PLEASE CONTACT AGENT.

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AGENCY CUSTOMER ID:	
1.00 "	



ADDITIONAL REMARKS SCHEDULE

Page	1	of	1
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AGENCY	NAMED INSURED		
Dennis Mudd	Fountain Court Homeowners	s Assn	
POLICY NUMBER			
93-19-5356-9			
CARRIER	NAIC CODE		
State Farm Fire and Casualty Company	25143	EFFECTIVE DATE: 06/19	9/2021

ADDITIONAL REMARKS

THIS ADDITIONAL REMA	RKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 24	FORM TITLE: Certificate of Property Insurance
H-14 0	

Unit Owner:

. - 575 N Spanish Springs Dr - Chandler, - AZ - 85226-2747 - Unit Loan Number:. - Number Of Units: 0036

Association Type: Residential Community Association Policy

Forms, Options and Endorsements:

CMP-4100	Businessowners Coverage Form	CMP-4814	Dir & Officers \$1,000,000
CMP-4203.2	Amendatory Endorsement	FE-6999.3	Terrorism Insurance Cov Notice
CMP-4550	Residential Community Assoc	CMP-4710	Emp Dishonesty \$25,000
CMP-4508	Money and Securities	CMP-4705.2	Loss of Income & Extra Expense
FE-3650	Actual Cash Value Endorsement	CMP-4573	Policy Endorsement

Forms, Options and Endorsements:

Coverages:

Business Liability	\$1,000,000
Medical Payments	\$5,000
Products-Completed Operations	\$2,000,000
General Aggregate	\$2,000,000

Coverage

Unless otherwise endorsed, this policy provides replacement cost coverage on described property and common areas detailed within the Association bylaws including the following types of property within a unit, regardless of ownership:

- 1. Fixtures, improvements and alterations that are a part of the building or structure; and
- 2. Appliances such as those used for refrigerating, ventilating, cooking, dishwashing, laundering, security or housekeeping.

Replacement cost coverage is subject to the terms and conditions of the policy and any endorsements.

Coverage under this policy may have been modified to provide actual cash value coverage rather than replacement cost coverage, or to remove specified property from coverage, if any endorsement containing in its title "ACV" or "Actual Cash Value," or "Additional Property Not Covered" is identified on this Certificate of Insurance.

Endorsements: FE-3650, FE-3653, FE-3658, and FE-3659 (Actual Cash Value) - These endorsements describe what the term "actual cash value" means where used in the policy. *However, these endorsements do not change any replacement cost coverage provided by the policy.*

This policy provides coverage on a standalone/individual condominium association.

Commercial General Liability

State Farm refers to this coverage as Business Liability Coverage. Coverage amount shown is Per Occurrence.

Loss of Rents, Loss of Income and Extra Expense

If this coverage is shown, limits are "Actual Loss Sustained". Contact the agent to confirm the number of day's coverage.