



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
05/26/2023

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 Kristen Kruger Boswell 115 E Baseline Rd Ste B1 Tempe, AZ 85283-1286	CONTACT NAME: Kristen Kruger Boswell PHONE (A/C, No, Ext): 480-777-0411 E-MAIL ADDRESS: kristen.krugerboswell.prhc@statefarm.com PRODUCER CUSTOMER ID:	FAX (A/C, No): 480-522-1500	
	INSURER(S) AFFORDING COVERAGE INSURER A : State Farm Fire and Casualty Company INSURER B : <input type="checkbox"/> INSURER C : <input type="checkbox"/> INSURER D : <input type="checkbox"/> INSURER E : <input type="checkbox"/> INSURER F : <input type="checkbox"/>		NAIC # 25143
INSURED SL 12 Lofts Association 16625 S Desert Foothills Pkwy Phoenix, AZ 85048-8470			

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 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.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS	
A	<input checked="" type="checkbox"/> PROPERTY	93-C2-A494-3	05/24/2023	05/24/2024	<input checked="" type="checkbox"/> BUILDING	\$ 3,504,400	
	CAUSES OF LOSS				DEDUCTIBLES	PERSONAL PROPERTY	\$
	BASIC				BUILDING 5,000	BUSINESS INCOME	\$ SEE ACORD 101
	BROAD				CONTENTS	EXTRA EXPENSE	\$ SEE ACORD 101
	<input checked="" type="checkbox"/> SPECIAL					RENTAL VALUE	\$ SEE ACORD 101
	EARTHQUAKE					BLANKET BUILDING	\$
	WIND					BLANKET PERS PROP	\$
	FLOOD					BLANKET BLDG & PP	\$
					\$		
	<input type="checkbox"/> INLAND MARINE	TYPE OF POLICY				\$	
	CAUSES OF LOSS	POLICY NUMBER				\$	
	<input type="checkbox"/> NAMED PERILS					\$	
	<input type="checkbox"/> CRIME					\$	
	TYPE OF POLICY					\$	
	<input checked="" type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$	
						\$	
						\$	

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 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 PHOENIX AZ 85048-8470	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
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ADDITIONAL REMARKS SCHEDULE

AGENCY Kristen Kruger Boswell		NAMED INSURED SI 12 Lofts Association 16625 S Desert Foothills Parkway Phoenix, AZ 85048	
POLICY NUMBER 93-C2-A494-3		EFFECTIVE DATE: 05/24/2023	
CARRIER State Farm Fire and Casualty Company	NAIC CODE 25143		

ADDITIONAL REMARKS

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 24 FORM TITLE: Certificate of Property Insurance**

Association Type: Residential Community Association Policy

Forms, Options and Endorsements:

- CMP-4100 Businessowners Coverage Form
- FE-6999.2 Terrorism Insurance Cov Notice
- FE-3650 Actual Cash Value Endorsement
- CMP-4705.2 Loss of Income & Extra Expense
- CMP-4710 Emp Dishonesty \$25,000
- Inflation Guard- Prev Risk \$2,959,100
- Building Ordinance or Law A- Loss of Value
- Building Ordinance or Law B- Demolition Cost Coverage
- Building Ordinance or Law C- Increased Cost of Construction

Forms, Options and Endorsements:

- CMP-4550 Residential Community Assoc
- CMP-4203.2 Amendatory Endorsement
- CMP-4573 Policy Endorsement
- CMP-4508 Money and Securities
- CMP-4814 Dir & Officers \$1,000,000

Coverages:

- Business Liability \$2,000,000
- Medical Payments \$5,000
- Products-Completed Operations \$4,000,000
- General Aggregate \$4,000,000

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.