**PLEASE MAKE ALL REQUESTS FOR EVIDENCE OF INSURANCE VIA OUR WEBSITE AT WWW.LUNDGRENINSURANCEAGENCY.COM

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/29/2022

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.

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

LUNDGREN INSURANCE AGENCY
2 N CENTRAL AVE STE 1800
PHOENIX, AZ 85004

CONTACT NAME: MATT LUNDGREN
PHONE (A/C, No, Ext): 602-218-6022 FAX (A/C, No): 800-878-3151
E-MAIL ADDRESS: CS@LUNDGRENINSURANCEAGENCY.COM

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : ACCELERANT NATIONAL INS CO	10220
INSURER B : CONTINENTAL CASUALTY INS CO	21881
INSURER C : FEDERAL INSURANCE CO	20281
INSURER D :	
INSURER E :	
INSURER F :	

INSURED

VENTANA HOMEOWNERS ASSOCIATION
C/O VISION COMMUNITY MANAGEMENT
16625 S DESERT FOOTHILLS PKWY
PHOENIX, AZ 85048

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 WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE [ ] OCCUR [X] GEN'L AGGREGATE LIMIT APPLIES PER: POLICY [ ] PRO-JECT [ ] LOC [ ] OTHER:	Y		N030PK1855-00	7/29/2023	7/29/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 1,000,000 $ 300,000 $ 10,000 $ 1,000,000 $ 2,000,000 $ 2,000,000 $
B	DIRECTORS AND OFFICERS CLAIMS MADE [X]	Y		619026231	7/29/2023	7/29/2024	EACH OCCURRENCE	$ 1,000,000
B	FIDELITY [ ] CRIME [X]	Y		619026231	7/29/2023	7/29/2024		$ $500,000
C	UMBRELLA LIAB [X] OCCUR EXCESS LIAB [ ] CLAIMS-MADE DED [ ] RETENTION $			G74606271	7/29/2023	7/29/2024	EACH OCCURRENCE AGGREGATE	$ 10,000,000 $ 10,000,000 $
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N [ ] (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A					PER STATUTE [ ] OTH-ER [ ] E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ $ $
A	BUILDING COVERAGE			N030PK1855-00	7/29/2023	7/29/2024	$ 15,234,208 GUARANTEED REPLACEMENT COST	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

BUILDING COVERAGE INCLUDES EXTERIOR OF THE BUILDINGS AND INTERIOR OF THE UNITS. BETTERMENTS AND IMPROVEMENTS TO THE INTERIOR OF THE UNITS ARE THE UNIT OWNERS RESPONSIBLITY. CLAIMS ARE SUBJECT TO A $10,000 AOP DEDUCTIBLE PER OCCURRENCE: SPECIAL FORM: 80 UNITS POLICY INCLUDES BUILDING ORDINANCE A,B,C: SEPARATION OF INSUREDS, BOILER/MACHINERY AND INFLATION GUARD
MANAGEMENT COMPANY IS ADDITIONAL INSURED ON GL, CRIME AND D&O
WIND/HAIL ARE INCLUDED PERILS

CERTIFICATE HOLDER

VISION COMMUNITY MANAGEMENT
16625 S DESERT FOOTHILLS PKWY
PHOENIX, AZ 85048

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN 30 DAYS.

AUTHORIZED REPRESENTATIVE

Matt Lundgren

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