



# **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

1/25/2026

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

<b>PRODUCER</b> LaBarre/Oksnee Insurance 30 Enterprise, Suite 180 Aliso Viejo CA 92656	<b>CONTACT NAME:</b>	<b>FAX (A/C, No):</b> 949-588-1275
	<b>PHONE (A/C, No, Ext):</b> 800-698-0711 <b>E-MAIL ADDRESS:</b> proof@hoa-insurance.com	
<b>INSURED</b> Vineyard Park Community Assn c/o Vision Community Mgmt 16625 S. Desert Foothills Pkwy Phoenix AZ 85048-9927	<b>INSURER(S) AFFORDING COVERAGE</b>	<b>NAIC #</b>
	<b>INSURER A :</b> American Alternative Ins Co.	19720
	<b>INSURER B :</b>	
	<b>INSURER C :</b>	
	<b>INSURER D :</b>	
	<b>INSURER E :</b>	
	<b>INSURER F :</b>	
<b>VINEPAR-03</b>		

## COVERAGES

**CERTIFICATE NUMBER:** 1346955680

**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.

EXCLUSIONS AND CONDITIONS OF COVERAGE. LIMITS SHOWN MAY HAVE BEEN REDUCED BY TRADITIONAL INSURANCE.													
INSR LTR	TYPE OF INSURANCE			ADDL/SUBR INSD WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS				
A	COMMERCIAL GENERAL LIABILITY			Y	CAU507104-6		2/1/2026	2/1/2027	EACH OCCURRENCE				
	CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR								\$ 1,000,000				
									DAMAGE TO RENTED PREMISES (Ea occurrence)				
									\$ 1,000,000				
									MED EXP (Any one person)				
									\$ 5,000				
									PERSONAL & ADV INJURY				
									\$ 1,000,000				
GEN'L AGGREGATE LIMIT APPLIES PER:													
X	POLICY	PRO- JECT	LOC						GENERAL AGGREGATE				
									\$ Unlimited				
									PRODUCTS - COMP/OP AGG				
									\$ 1,000,000				
									\$				
A	AUTOMOBILE LIABILITY			Y	CAU507104-6		2/1/2026	2/1/2027	COMBINED SINGLE LIMIT (Ea accident)				
	ANY AUTO								\$ 1,000,000				
	OWNED AUTOS ONLY								BODILY INJURY (Per person)				
	HIRED AUTOS ONLY								\$				
	SCHEDULED AUTOS								BODILY INJURY (Per accident)				
	NON-OWNED AUTOS ONLY								\$				
UMBRELLA LIAB													
			OCCUR						PROPERTY DAMAGE (Per accident)				
				CLAIMS-MADE					\$				
									\$				
	DED	RETENTION \$							EACH OCCURRENCE				
									\$				
									AGGREGATE				
									\$				
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			Y / N	N / A				PER STATUTE				
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)								OTH-ER				
	If yes, describe under DESCRIPTION OF OPERATIONS below								E.L. EACH ACCIDENT				
									\$				
									E.L. DISEASE - EA EMPLOYEE				
									\$				
									E.L. DISEASE - POLICY LIMIT				
									\$				
A	Property Crime/Fidelity Directors & Officers			Y	CAU507104-6		2/1/2026	2/1/2027	\$ 1,000 Deductible				
A				Y	CAU507104-6		2/1/2026	2/1/2027	\$ 0 Deductible				
A				Y	CAU507104-6		2/1/2026	2/1/2027	\$ 0 Deductible				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
HOA consists of 110 units. Located in Phoenix, AZ

Management Company is Additionally Insured on the General Liability, D&O Liability, and Fidelity/Crime.

See 2nd page of certificate of insurance for further coverage information

See Attached...

## CERTIFICATE HOLDER

## CANCELLATION

Vision Community Management  
16625 S. Desert Foothills Pkwy.  
Phoenix AZ 85048  
USA

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**

John G.

© 1988-2015 ACORD CORPORATION. All rights reserved.



## ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY LaBarre/Oksnee Insurance		NAMED INSURED Vineyard Park Community Assn c/o Vision Community Mgmt 16625 S. Desert Foothills Pkwy Phoenix AZ 85048-9927	
POLICY NUMBER			
CARRIER	NAIC CODE	EFFECTIVE DATE:	

### ADDITIONAL REMARKS

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**  
**FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE**

Coverage is for COMMON AREAS ONLY.

Coverage Includes:

Special Form with 100% Guaranteed Replacement Cost including common area elements

Additional Property Limit of \$20,000 for Trees/Shrubs

Wind/Hail (excludes direct loss to Trees/Shrubs)

Equipment Breakdown

Building Ordinance or Law

Severability of Interest / Separation of Insureds

No Co-Insurance

D&O is a claims-made policy