

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/23/2022

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 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).

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PRODUCER		CONTACT NAME:				
LaBarre/Oksnee Insurance 30 Enterprise, Suite 180 Aliso Viejo CA 92656			FAX (A/C, No): 949-588-1275			
		E-MAIL ADDRESS: proof@hoa-insurance.com				
		INSURER(S) AFFORDING COVERAGE		NAIC#		
		INSURER A: PMA Insurance Group		12262		
Montego Bay Condo Assoc c/o Vision Community Mgmt 16625 S. Desert Foothills Pkwy Phoenix AZ 85048	MONTBAY-01	INSURER B: American Alternative Ins Co.		19720		
		INSURER c : Continental Casualty Company		20443		
		INSURER D: Fireman's Fund Insurance Co.		21873		
		INSURER E :				
		INSURER F:				
COVERAGES	CERTIFICATE NUMBER: 1685205918	REVISION NUM	/IBER:			
THIS IS TO CERTIFY THAT THE PO	LICIES OF INSURANCE LISTED BELOW HAV	VE BEEN ISSUED TO THE INSURED NAMED ABOV	E FOR THE POLIC	CY PERIOD		

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.

			_	LIMITS SHOWN MAY HAVE BEEN F		-		
INSR LTR	TYPE OF INSURANCE	ADDL INSD	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
В	X COMMERCIAL GENERAL LIABILITY	Υ		CAU514179-4	3/25/2022	3/25/2023	EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000
	CLAIMS-MADE X OCCUR						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:						GENERAL AGGREGATE	\$ Included
	X POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ Included
	OTHER:							\$
В	AUTOMOBILE LIABILITY			CAU514179-4	3/25/2022	3/25/2023	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	ANY AUTO						BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	\$
	X HIRED X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
								\$
D	X UMBRELLA LIAB X OCCUR			USL01482121U-13902-7	3/25/2022	3/25/2023	EACH OCCURRENCE	\$5,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 5,000,000
	DED RETENTION \$							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$
	(Mandatory in NH)	.,,,					E.L. DISEASE - EA EMPLOYEE	\$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
B A C	Property Crime/Fidelity Directors & Officers	*		CAU514179-4 4122010471458Y 619005380	3/25/2022 3/25/2022 3/25/2022	3/25/2023 3/25/2023 3/25/2023	\$5,000 Deductible \$2,500 Deductible \$1,000 Deductible	\$5,825,000 \$225,000 \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) HOA consists of 52 units. Located in Phoenix, AZ 85014.

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	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 USA	AUTHORIZED REPRESENTATIVE

AGENCY	CHIST	OMED	ID-	MONT	RAY-01
AGENCI	CUSI	DIVIER	ID.	IVICIAL	DA 1 -0 1

LOC #:

R	
ACORD	

ADDITIONAL REMARKS SCHEDULE				1 OT	1
AGENCY LaBarre/Oksnee Insurance POLICY NUMBER		MAMED INSURED Montego Bay Condo Assoc c/o Vision Community Mgmt			
		16625 S. Desert Foothills Pkwy Phoenix AZ 85048			
CARRIER	NAIC CODE				
		EFFECTIVE DATE:			
ADDITIONAL REMARKS					
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO	,				
FORM NUMBER: 25 FORM TITLE: CERTIFICA	TE OF LIABILITY I	NSURANCE			

Single Entity Coverage (Walls In, excluding Improvements and Betterments)

Coverage Includes: Special Form with 100% Replacement Cost Guaranteed Replacement Cost Wind/Hail
Equipment Breakdown
Building Ordinance or Law A+B+C
Inflation Guard and/or limits are reviewed yearly to ensure 100% Replacement Cost
Severability of Interest / Separation of Insureds
Waiver of Rights of Recovery
No Co-Insurance
D&O is a Claims-Made Policy



LaBarre/Oksnee Insurance

Montego Bay Condominium Association

The Association maintains a master insurance policy. This policy includes **General Liability** (protects the association from lawsuits arising out of the third party injuries), **Directors & Officers Liability** (protects the association from claims or lawsuits against the board), and **Fidelity/Crime coverage** (protects the money in the bank from fraudulent or dishonest acts). The Association also carries property coverage to insure the buildings and finished interiors (including fixtures, all built-in or set-in appliances, cabinets, countertops and initial basic floor coverings as initially installed per the original plans and specifications, EXCLUDING upgrades, betterments & Improvements) for property damage. Some examples of the perils you are insured for are wind, hail, lightening, fire, vandalism, malicious mischief, explosion, and sudden and accidental water damage. There are certain exclusions to the master policy such as your personal property, standard maintenance, items damaged by normal wear and tear or pest (vermin) damage and subsidence. The Associations policy carries a \$5,000 Deductible, which, depending on the circumstances of the loss, could be your responsibility as the homeowner.

What Insurance Coverage does a Unit Owner Need?

- **Personal Property** coverage WITH replacement cost covering your personal belongings as the master association policy does not cover Unit Owner's personal property.
- Please be sure to notify your personal insurance agent that this association carries a \$5,000 Deductible so that
 you are covered in the event you are responsible for that Deductible or loss sustained within your Unit that is less
 than the Deductible.
- Building upgrades, betterments and improvements can be covered on your personal insurance. Betterments,
 Improvements or Upgrades to your Unit need to be covered by you as an owner to cover any gaps in coverage in
 the event of loss. Please also note that if your individual unit has solar panels, your own personal insurance will
 need to insure them. The association insurance coverage will be limited to "industry standard materials" of like,
 kind and quality for the replacement of finished flooring, wall coverings, fixtures and cabinets.
- Loss of Use will pay the unit owners living expense while the unit is not inhabitable due to an insured loss. If your condo is rented out, this coverage will be replaced with Loss of Rents coverage.
- Loss Assessment will pay the owners share of a special assessment levied to all homeowners in the association due to an insured loss exceeding the associations master policy limits.
- **Personal Liability** pays for bodily injuries to other people or damage to their property if you are liable resulting from unintentional acts committed by qualified family members including sporting activities and acts of your pets.

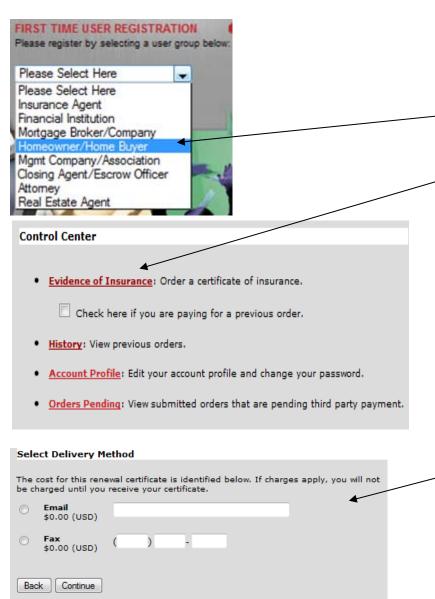
Be sure to touch base with your personal insurance agent today or **call our office at (800) 698-0711** to secure coverage immediately or call our Personal Lines Expert, **Tina Terrell**, direct at **949-215-9803**. Thank you!





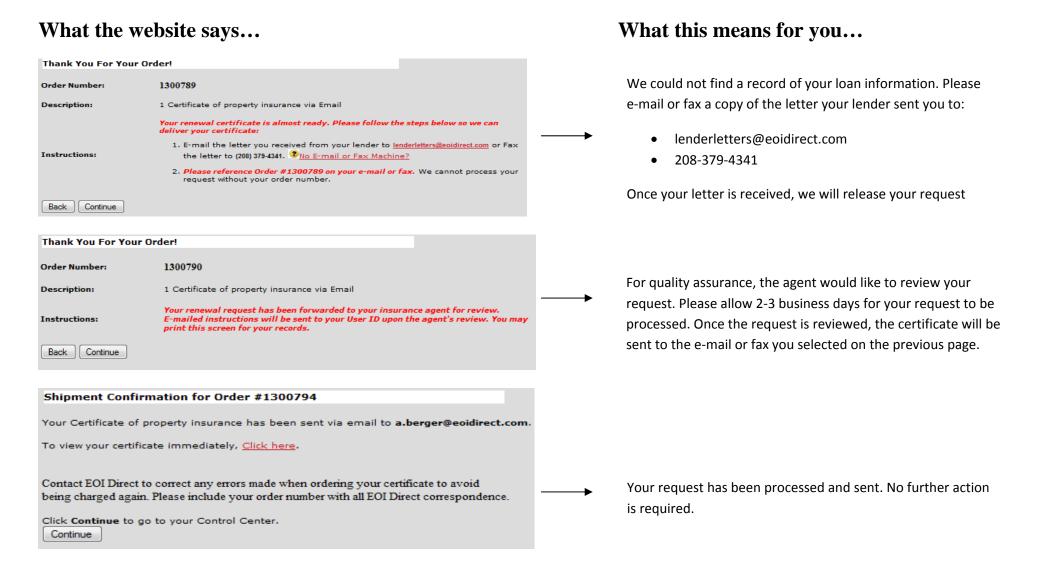


Renewal Certificate Instructions for Homeowners & Management Co.



- 1. Visit eoidirect.com
- 2. Register as a First Time User
- 3. Log into your account.
- 4. Click on "Evidence of Insurance".
- 5. Search for your condominium name
- 6. Select your association, "Continue".
- 7. Choose the 4th option that indicates you received a letter from your lender, "Continue".
- 8. Fill in the Homeowner's last name and loan number, "Continue".
- 9. Fill out all required fields for Homeowner and Lender, "Continue".
- 10. Confirm the order information, "Continue"
- 11. Select delivery method where you would like the certificate sent.

After selecting the delivery method where you want the Certificate of Insurance sent, you will see 1 of 3 sets of instruction. Proceed accordingly.



For assistance with the website, please contact EOIDirect Monday-Friday 7:00am-6:00pm MST at 877-456-3643