

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/12/2022

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).

certificate fiolider in fied of 3dcfr (	muor sement(s).						
PRODUCER		CONTACT Mike Stapley Agency Inc					
Mike Stapley Agency Inc 4850 E Baseline Rd Ste 101		PHONE A/C, No, Ext): (480) 503-4450 FAX (A/C, No): (855) 557-8475					
		E-MAIL ADDRESS: Mikestapleyagency@amfam.com					
Mesa, AZ 85206 (480) 503-4450 (072/404)		INSURER(S) AFFOR	INSURER(S) AFFORDING COVERAGE				
Villa Oak Homeowners Association, Inc c/o Vision Community Management 16625 S Desert Foothills Pkwy		INSURER A: American Family Mutual Insurance Company, S.I. 19275					
		INSURER B:					
		INSURER C:					
		INSURER D:					
		INSURER E:					
Phoenix, AZ 85048		INSURER F:					
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		SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	e		
A	AUTOMOBILE LIABILITY	Y		FOLICT NUMBER		11/01/2023	BODILY INJURY (Per person)	ī	1,000,000	
	ANY AUTO						BODILY INJURY (Per accident)	\$	1,000,000	
	ALL OWNED SCHEDULED AUTOS			910020983874			PROPERTY DAMAGE (Per accident)	\$	1,000,000	
	★ HIRED AUTOS     ★ NON-OWNED AUTOS     AUTOS						BODILY INJURY	\$		
								\$		
	▼ COMMERCIAL GENERAL LIABILITY	. Y		910020983874	11/01/2022	11/01/2023	EACH OCCURRENCE	\$	1,000,000	
	☐ ☐ CLAIMS-MADE ☒ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000	
	l⊓ '		,				MED EXP (Any one person)	\$	5,000	
Α							PERSONAL & ADV INJURY	\$	1,000,000	
/ \	│						GENERAL AGGREGATE	\$	2,000,000	
	GEN'LAGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$	2,000,000	
	X POLICY PROJECT LOC  X OTHER Crime/Fidelity						\$1,000 Deductible	\$	300,000	
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$		
	☐ DED ☐ RETENTION \$							\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N	N/A						☐ PER ☐ OTHER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE						E.L. EACH ACCIDENT	\$		
	(Mandatory in NH)	N/A					E.L. DISEASE - EA EMPLOYEE	\$		
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$		
Α	Directors & Officers	Υ		910020983874	11/01/2022	11/01/2023	\$1,000,000 \$1,000 [	Deductible		

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

Property covered at Replacement Cost, "Bare Walls" - Excludes walls in including betterments and improvements - \$5,000 Deductible Sewer Backup: \$100,000 limit with a \$5,000 deductible

Property Manager is included as Additional Insured on the GL, D&O and Crime/Fidelity.

CERTIFICATE HOLDER	CANCELLATION			
Vision Community Management 16625 S Desert Foothills Pkwy Phoenix, AZ 85048	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			
	Courtney Montgomery			

This fact sheet is designed to assist you in purchasing your own insurance to coordinate with the master policy. Your personal insurance policy can be set up to cover the Master deductible.

# Villa Oak Homeowners Association, Inc. Master Insurance Program



## Key information regarding the association's master policy:

- The units are covered as "Bare Walls" excludes walls in, betterments and improvements, as outlined in the Governing Documents.
- The Master Insurance deductible is \$5,000 and is assessed exclusively against units benefiting from the claim.

# **Key information regarding unit owner's insurance needs:**

- You need a condominium owner's policy to provide coverage for your personal property, building property that is your responsibility, loss assessment, personal liability, and other coverages you deem necessary.
- Your policy should be written to cover the Master Insurance deductible as part of your unit-owners policy.

### **Certificate of Insurance**

• If you refinance or sell your unit, insurance copies may be requested by your mortgage broker, realtor, or directly by you. We do not charge for copies of your insurance.

#### **Claims**

• If you feel that your association needs to file a claim on the master policy, notify Vision Community Management at 480-759-4945.

#### **Deductible waiver program:**

- The unitowners policy should be written to provide coverage for the Master Insurance deductible, up to \$5,000.
- Furthermore, if your personal policy is with American Family and there is a claim involving both policies, your personal deductible will be waived.



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