

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/25/2024

| IMPORTANT: If the certificate holder is an ADDITIONAL INSURED provides may require an endorsement. A statement on this certificate does not confor rights to the certificate holder in lieu of such endorsement(s). INFORCES | 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. | | | | | | | | | |
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The ACORD name and logo are registered marks of ACORD

AGENCY CUSTOMER ID: MONTBAY-01

LOC #:

| ACORD | |
|-------|--|
| | |

ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

| AGENCY | NAMED INSURED | | | | | | |
|---|--|-----------------|--|--|--|--|--|
| LaBarre/Oksnee Insurance | Montego Bay Condo Assoc c/o Vision Community Mgmt | | | | | | |
| POLICY NUMBER | 16625 S. Desert Foothills Pkwy | | | | | | |
| | Phoenix AZ 85048 | | | | | | |
| CARRIER | NAIC CODE | | | | | | |
| | | | | | | | |
| | | EFFECTIVE DATE: | | | | | |
| ADDITIONAL REMARKS | | | | | | | |
| THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, | | | | | | | |
| FORM NUMBER: | | | | | | | |
| | | | | | | | |

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

Coverage Includes: Special Form with 100% 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