



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/15/2022

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).

<b>PRODUCER</b> LaBarre/Oksnee Insurance 30 Enterprise, Suite 180 Aliso Viejo CA 92656		<b>CONTACT NAME:</b> <b>PHONE (A/C. No. Ext):</b> 800-698-0711 <b>FAX (A/C. No):</b> 949-588-1275 <b>E-MAIL ADDRESS:</b> proof@hoa-insurance.com	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A :</b> Lio Insurance	<b>NAIC #</b> 40550
<b>INSURED</b> Scottsdale 2000 Condo Association c/o Vision Community Management 16625 S Desert Foothills Pkwy Phoenix AZ 85048		<b>INSURER B :</b> Fireman's Fund Insurance Co.	21873
		<b>INSURER C :</b> Continental Casualty Company	20443
		<b>INSURER D :</b> The Hanover Insurance Co.	22292
		<b>INSURER E :</b>	
		<b>INSURER F :</b>	

**COVERAGES**

CERTIFICATE NUMBER: 2068417488

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	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b>  <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		COA1000005234-00	9/24/2021	9/24/2022	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
	<b>AUTOMOBILE LIABILITY</b>  <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
B	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR  <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE  DED    RETENTION \$			USL00656920U-70399-1	9/24/2021	9/24/2022	EACH OCCURRENCE	\$ 5,000,000
							AGGREGATE	\$ 5,000,000
								\$
D	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	W2YH920631	3/8/2022	9/24/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER	
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
A	Property		Y	COA1000005234-00	9/24/2021	9/24/2022	\$5,000 Deductible	\$7,585,550
A	Crime/Fidelity		Y	COA1000005234-00	9/24/2021	9/24/2022	\$5,000 Deductible	\$250,000
C	Directors & Officers		Y	618847556	3/8/2022	9/24/2022	\$1,000 Deductible	\$1,000,000

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

HOA consists of 40 units. Located in Scottsdale, AZ.

Management Company is Additionally Insured on the General Liability, D&amp;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

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**ADDITIONAL REMARKS SCHEDULE**

AGENCY LaBarre/Oksnee Insurance		NAMED INSURED Scottsdale 2000 Condo Association c/o Vision Community Management 16625 S Desert Foothills Pkwy Phoenix AZ 85048	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

**ADDITIONAL REMARKS**

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

All In (Walls In, Including Improvements)  
 Coverage Includes:  
 Special Form with 100% 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



IMPORTANT INSURANCE INFORMATION FOR 09/24/2021 to 09/24/2022

September 24, 2021

Dear Scottsdale 2000 Condominium Association Homeowner,

THE FOLLOWING GIVES IMPORTANT INFORMATION REGARDING YOUR ASSOCIATION'S INSURANCE!

Property Coverage: Master policy with LIO Insurance

Direct physical loss coverage is provided for all units and includes all separate structures owned by the association in the amount of **\$7,585,550** and is subject to a **\$5,000** deductible per occurrence. Basically, any direct physical loss to a building or separate structure is covered except loss by perils that are specifically excluded. Some of the standard exclusions are nuclear war, wear and tear, flood, damage by insects and vermin, inherent vice, subsidence, and faulty construction. This is not a maintenance policy and will provide coverage for perils as described in the policy.

General Liability: \$1,000,000 with LIO Insurance / \$5,000,000 with Fireman's Fund Insurance Company

This **\$6,000,000** of liability coverage protects your Association from lawsuits arising out of the injuries that occur within the common areas owned by the Association. This liability does not protect individual unit owners for their liability exposure arising out of the ownership, maintenance, or use of their own individual units.

Director & Officers Coverage: \$1,000,000 with Continental Casualty Company

This **\$1,000,000** of liability coverage protects the board for the cost of defense and claims arising from the lawsuits alleging that the directors had failed to properly perform their required duties.

Fidelity Bond: **\$250,000** with LIO Insurance

These bonds protect only against fraudulent or dishonest acts by the persons named in the policy, generally the board of directors. Fidelity bonds **DO NOT COVER** mysterious disappearance, burglary or thefts by outside parties, ordinary mismanagement of funds or overspending.

As a unit owner, you are responsible for insuring the contents of your unit and your personal liability. We also recommend that your unit owner policy insure additional living expenses, loss assessment and any gaps in coverage. Your agent should know and understand that you may be responsible for the **\$5,000** deductible if a loss results from an area within your responsibility.

Be sure and contact your personal insurance agent to make sure that you are adequately covered, and your coverage coincides with the Association's insurance. Report all claims immediately to the Community Association Manager.

Sincerely,

Mike DiNino  
LaBarre/Oksnee Insurance Agency



## What a Unit Owner Needs COVERAGES FOR YOUR PERSONAL INSURANCE

Almost all condo associations provide basic property coverage for fire, theft and vandalism. These policies will cover the individual units; however, there may be some exclusions. Each year your association is required to mail an insurance disclosure to every owner. It is always a good idea to fax the disclosure to your insurance agent for an annual review of your personal policies.

### **The most important coverages for condo owners are:**

**Personal Liability** – Pays damages which you are legally obligated to pay because of bodily injury or property damage resulting from an occurrence.

**Umbrella Liability**- Additional liability coverage, available through your automobile policy. *This policy is usually written through your auto policy agent.*

**Personal Property** – Moveable items, such as furniture, clothes, dishes, appliances, computers, etc.

**Building Property** – Be sure to check with your management company to see what exclusions may exist on your master policy, such as floor and wall coverings. It is also a good idea to advise your personal carrier of the Master policy deductible. It may be the unit owners' responsibility to pay for that! Many personal carriers will cover the HOA policy deductible. It is an important Gap to close!

**Loss of use** – Helps with necessary increase of living expenses if you cannot stay in the condo due to a covered loss.

**Guest Medical** – Will pay reasonable charges for medical, surgical, x-ray, dental, etc. resulting from an occurrence on your property.

**Loss Assessment** – Pays for losses in common area of the association that exceed master policies coverage which result in a special assessment to all unit owners equally.

**Earthquake loss assessment** – pays for losses related to the living units in the event of an earthquake that may result in a special assessment to all unit owners equally.

**Jewelry & Art** - high value jewelry and/or collectibles should be covered under a “scheduled or non scheduled floater”.

*Compliments of:*



**LaBarre Oksnee Insurance Agency, Inc.**



## Renewal Certificate Instructions for Homeowners & Management Co.

**FIRST TIME USER REGISTRATION**  
Please register by selecting a user group below:

Please Select Here

- Please Select Here
- Insurance Agent
- Financial Institution
- Mortgage Broker/Company
- Homeowner/Home Buyer**
- Mgmt Company/Association
- Closing Agent/Escrow Officer
- Attorney
- Real Estate Agent

**Control Center**

- **Evidence of Insurance:** Order a certificate of insurance.  
 Check here if you are paying for a previous order.
- **History:** View previous orders.
- **Account Profile:** Edit your account profile and change your password.
- **Orders Pending:** View submitted orders that are pending third party payment.

**Select Delivery Method**

The cost for this renewal certificate is identified below. If charges apply, you will not be charged until you receive your certificate.

**Email**  
\$0.00 (USD)

**Fax**  
\$0.00 (USD)

Back Continue

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 4<sup>th</sup> 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.

## What the website says...


**Thank You For Your Order!**

**Order Number:** 1300789

**Description:** 1 Certificate of property insurance via Email

*Your renewal certificate is almost ready. Please follow the steps below so we can deliver your certificate:*

**Instructions:**

1. E-mail the letter you received from your lender to [lenderletters@eoidirect.com](mailto:lenderletters@eoidirect.com) or Fax the letter to (208) 379-4341.  [No E-mail or Fax Machine?](#)
2. *Please reference Order #1300789 on your e-mail or fax.* We cannot process your request without your order number.

## What this means for you...

We could not find a record of your loan information. Please e-mail or fax a copy of the letter your lender sent you to:

- [lenderletters@eoidirect.com](mailto:lenderletters@eoidirect.com)
- 208-379-4341

Once your letter is received, we will release your request

**Thank You For Your Order!**

**Order Number:** 1300790

**Description:** 1 Certificate of property insurance via Email

*Your renewal request has been forwarded to your insurance agent for review. E-mailed instructions will be sent to your User ID upon the agent's review. You may print this screen for your records.*

For quality assurance, the agent would like to review your request. Please allow 2-3 business days for your request to be processed. Once the request is reviewed, the certificate will be sent to the e-mail or fax you selected on the previous page.

**Shipment Confirmation for Order #1300794**

Your Certificate of property insurance has been sent via email to [a.berger@eoidirect.com](mailto:a.berger@eoidirect.com).

To view your certificate immediately, [Click here](#).

Contact EOI Direct to correct any errors made when ordering your certificate to avoid being charged again. Please include your order number with all EOI Direct correspondence.

Click **Continue** to go to your Control Center.

Your request has been processed and sent. No further action is required.

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