

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/23/2022

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).

PRODUCER		CONTACT NAME:		
LaBarre/Oksnee Insurance 30 Enterprise, Suite 180		PHONE (A/C, No, Ext): 800-698-0711	FAX (A/C, No): 949-588-1275	
Aliso Viejo CA 92656		E-MAIL ADDRESS: proof@hoa-insurance.com		
		INSURER(S) AFFORDING COVERAGE	NAIC#	
		INSURER A: Lio Insurance	40550	
Scottsdale 2000 Condo Association c/o Vision Community Management 16625 S Desert Foothills Pkwy Phoenix AZ 85048	SCOT200-01	INSURER B: Continental Casualty Company	20443	
		INSURER C: The Hanover Insurance Co.	22292	
		INSURER D: Federal Insurance	20281	
		INSURER E:		
		INSURER F:		
00/504050	OFFICIONE NUMBER: 07500000	DEVICION NIII	MDED.	

COVERAGES CERTIFICATE NUMBER: 975292966 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)	LIMIT	s
Α	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	Υ		COA1000005234-00	9/24/2022	9/24/2023	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 100.000
	OLANINO-WADE COCON						MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
	X POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
	OTHER:							\$
Α	AUTOMOBILE LIABILITY			COA1000005234-00	9/24/2022	9/24/2023	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			TBD	9/24/2022	9/24/2023	EACH OCCURRENCE	\$5,000,000
	X EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 5,000,000
	DED RETENTION\$							\$
С	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			W2YH920631	9/24/2022	9/24/2023	X PER OTH- STATUTE ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE T/N	N/A					E.L. EACH ACCIDENT	\$1,000,000
	(Mandatory in NH)	,					E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
A A B	Property Crime/Fidelity Directors & Officers	Y		COA1000005234-00 COA1000005234-00 618847556	9/24/2022 9/24/2022 9/24/2022	9/24/2023 9/24/2023 9/24/2023	\$5,000 Deductible \$5,000 Deductible \$1,000 Deductible	\$8,878,298 \$250,000 \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) HOA consists of 40 units. Located in Scottsdale, AZ 85251.

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, LLC 16625 S Desert Foothills Pkwy Phoenix AZ 85048-9927 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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AGENCY CUSTOMER ID:	SCOT200-01
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LOC #:

R	
ACORD	

ADDITIONAL REMARKS SCHEDULE

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

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% Guaranteed Replacement Cost Wind/Hail (Includes wind) Equipment Breakdown Building Ordinance or Law A+B+C Inflation Guard Severability of Interest / Separation of Insureds Waiver of Rights of Recovery No Co-Insurance D&O is a Claims-Made Policy						



LaBarre/Oksnee Insurance

Scottsdale 2000 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, including 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 master policy carries a \$5,000 Property Damage Deductible.**

While the Association's master insurance policy will cover many insurance needs for unit owners, we strongly encourage every owner to carry a personal condominium unit owners policy (HO-6) for items not covered by the Associations policy.

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 for Unit Owner's personal property.
- Coverage is provided for the building and the condominium unit for covered causes of loss, subject to the deductible. Coverage is provided back to original specifications and includes betterments and improvements.
- 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.
- 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 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 to ensure you are properly insured, or if you would like a competitive quote, you can call our Personal Lines Expert, **Tina Terrell,** direct at **949-215-9803**. Thank you!







EOI Instructions for Homeowners: How to Obtain Proof of Renewal for Lender

Go to www.EOIDirect.com

- Under First-Time Users, select Homeowner/Home Buyer from the drop-down
 -Continue
- Enter your email and create a password
- Next to the "I am A", select Homeowner/ Home Buyer from the drop-down
 -Continue

<u>Homeowner/ Home Buyer Registration</u>:

Fill-out and complete homeowner's information

-Save and Continue

User Service Agreement:

Review terms (some will not apply to homeowners)

-Accept and Continue

Successfully Registered:

-Continue → You will be transferred to the <u>Log-In Screen</u>
Under 'Existing Users,' enter your newly created username and password

Control Center Screen:

Click on the words "Evidence of Insurance": Order a Certificate of Insurance Fill in Homeowners Association Name and Select State**

- **You will need to know the association's legal name
- -Continue

Next, select the association that best matches

-Continue

Homeowners/ Homebuyers Reason for Certificate:

Select I have received a letter from my lender requesting an annual update of my insurance policy. (Your lender may indicate they will be purchasing, or have purchased, insurance on your behalf).

-Continue

Next, you will be asked to input *Borrowers Last Name and Loan Number* to locate your account. If the system does not find your lender's information, then you will be given the opportunity to input that information.

-Fill in required fields and click Continue

Select Delivery Method:

Select preferred method of delivery.

Email or Fax options will both be free of charge.

-Continue

Lastly, write the order number at the top of the Lenders Request letter and fax to (208) 379- 4341.

A copy of the Certificate of Liability with the updated mortgagee clause will be sent to your lender, in addition to you as requested.