Policy Number: 606776798 Date Entered: 12/28/2021 DATE (MM/DD/YYYY) ACORI CERTIFICATE OF LIABILITY INSURANCE 12/ 6/2022 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). CONTACT Tina Ribic PRODUCER Cox Insurance Services PHONE (A/C, No, Ext): (480)907-6000 E-MAIL \_\_\_\_\_Certificate@cox FAX (A/C. No): (480) 664-8275 10607 N. Frank Lloyd Wright Blvd E-MAIL ADDRESS: certificate@coxinsurance.net Suite 101 INSURER(S) AFFORDING COVERAGE NAIC # Scottsdale, AZ 85259 21709 INSURERA: Truck Insurance Exchange INSURED LC Villas Owners Association **INSURER B** : C/O Vision Community Management INSURER C : 16625 S. Desert Foothills Pkwy. **INSURER D**: Phoenix, AZ 85048 INSURER E : **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 ADDL SUBR INSD WVD POLICY EFF (MM/DD/YYYY) POLICY EXP (MM/DD/YYYY) TYPE OF INSURANCE POLICY NUMBER LIMITS s 2,000,000 COMMERCIAL GENERAL LIABILITY Α EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) <sub>\$</sub>75,000 CLAIMS-MADE X OCCUR Х 1/16/2023 1/16/2024 607184474 D&O- \$2,000,000 s 5,000 MED EXP (Any one person) DED- \$1,000 s2,000,000 PERSONAL & ADV INJURY <sub>\$</sub>4,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE s 2,000,000 PRO-JECT K LOC POLICY PRODUCTS - COMP/OP AGG OTHER COMBINED SINGLE LIMIT \$2,000,000 AUTOMOBILE LIABILITY (Ea accident) 1/16/2023 1/16/2024 А ANY AUTO 607184474 BODILY INJURY (Per person) \$ OWNED AUTOS ONLY SCHEDULED BODILY INJURY (Per accident) \$ AUTOS NON-OWNED PROPERTY DAMAGE HIRED \$ AUTOS ONLY AUTOS ONLY (Per accident) \$ UMBRELLA LIAB OCCUR EACH OCCURRENCE \$ EXCESS LIAB CLAIMS-MADE AGGREGATE \$ \$ DED **RETENTION \$** WORKERS COMPENSATION OTH-ER STATUTE AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT \$ N/A (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT \$ 1/16/2023 1/16/2024 \$175,000 Employee Dishonesty 607184474 \$10,000 Α DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) 30 days written notice of cancellation is required prior to cancellation Loaction: 5249 E Shea Blvd, Scottsdale, AZ 85254 Vision Community Management is listed as an Additional Insured 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 Phoenix, AZ 85048 ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 1/ally

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