





**ADDITIONAL REMARKS SCHEDULE**

AGENCY LaBarre/Oksnee Insurance		NAMED INSURED Portofino HOA c/o Vision Community Mgmt 16625 S. Desert Foothills Pkwy Phoenix AZ 85048-9927	
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**

Coverage is for COMMON AREAS ONLY

Coverage Includes:  
 Special Form with 100% Guaranteed Replacement Cost  
 \$20,000 Property Sublimit for Trees/Shrubs  
 Wind/Hail (excludes Trees/Shrubs)  
 Building Ordinance or Law  
 Severability of Interest / Separation of Insureds  
 No Co-Insurance  
 D&O is a Claims-Made Policy