

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 01/13/2025

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.

PRODUCER		CONTACT NAME:						
Socher Insurance Agency, Inc.		PHONE (A/C, No, Ext): (877) 317-9300	FAX (A/C, No): (877)	317-9305				
Socher Insurance Agency, 7901 Stoneridge Drive, Sui Pleasanton, CA 94588	e 403	E-MAIL ADDRESS: info@hoainsurance.net						
		PRODUCER CUSTOMER ID: CAVECRE-01						
		INSURER(S) AFFORDING COVERAGE	NAIC#					
INSURED		INSURER A: American Alternative Insurance Corporation						
Cave Creek V	Cave Creek Villas Homeowners Association Real Manage Family Of Brands Vision Community Manage 16625 South Desert Foothills Pkwy Phoenix. AZ 85048	INSURER B : Continental Casualty Company	1					
Real Manage		INSURER C :						
		INSURER D :						
Piloellix, AZ (5040	INSURER E :						
		INSURER F:						

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Please see Certificate of Liability, Acord 25, for remaining coverage. Equipment Breakdown coverage included. Crime/Employee Dishonesty/Fidelity Bond includes Property Manager as an Employee.

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.

NSR LTR				POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)		COVERED PROPERTY	LIMITS	
Α	Х	PROPERTY					Х	BUILDING	\$ 29,875,000	
	CAUSES OF LOSS DEDUCTIBLES		DEDUCTIBLES	CAU531642-1	11/01/2024	11/01/2025		PERSONAL PROPERTY	\$	
	BASIC BUILDING 10,000 BROAD CONTENTS		BUILDING 10 000					BUSINESS INCOME	\$	
			-					EXTRA EXPENSE	\$	
	X	SPECIAL	CONTENTO					RENTAL VALUE	\$	
		EARTHQUAKE						BLANKET BUILDING	\$	
		WIND						BLANKET PERS PROP	\$	
		FLOOD						BLANKET BLDG & PP	\$	
	Х	water ded:	20,000				X	Ord cov B:	\$ 1,000,000	
	Х	Ord cov A: inc					X	Ord cov C:	\$ 1,000,000	
		INLAND MARINE		TYPE OF POLICY					\$	
	CAL	JSES OF LOSS							\$	
		NAMED PERILS		POLICY NUMBER					\$	
									\$	
В	Х	CRIME					Х	Deductible: \$1,000	\$ 405,000	
	TYPE OF POLICY								\$	
	Fidelity Bond			768629816	11/01/2024	11/01/2025			\$	
		BOILER & MACHINERY /							\$	
	EQUIPMENT BREAKDOWN								\$	
									\$	
									\$	

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Special Form (wind included), Guaranteed Replacement Cost Basis with No Co-Insurance. 120 Units. Policy is Walls in excluding Betterments & Improvements. Severability of Interest included on Package Policy. Common elements included on policy.

CERTIFICATE HOLDER CANCELLATION

RealManage Family of Brands - Vision Community Management 16625 South Desert Foothills Pkwy Phoenix, AZ 85048 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

Dont

CAVECRE-01

CKOK

ACORD*

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/13/2025

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lf	SU	RTANT: If the certificate holder BROGATION IS WAIVED, subject ertificate does not confer rights to	t to	the	terms and conditions of	the po	licy, certain	policies may				
PRODUCER Socher Insurance Agency, Inc.					CONTACT NAME: PHONE (A/C, No, Ext): (877) 317-9300 E-MAIL ADDRESS: info@hoainsurance.net					377) 3	17-9305	
Pleasanton, CA 94588						INSURER(S) AFFORDING COVERAGE						NAIC#
						INSURER A: American Alternative Insurance Corporation					tion	
INSU	RED	Cave Creek Villas Homeown	ore /	۱ د د ۸	ciation			ental Casua	Ity Company			
		Real Manage Family Of Brai				INSURER C:						
16625 South Desert Foothills Pkwy							INSURER D:					
		Phoenix, AZ 85048				INSURER E :						
						INSURER F:						
	COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:											
IN Ce	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.											
NSR LTR	TYPE OF INSURANCE ADDL SUBR INSU POLICY NUMBER						POLICY EFF	POLICY EXP (MM/DD/YYYY)	LIMITS			
Α	X	COMMERCIAL GENERAL LIABILITY						,	EACH OCCURRENCE		\$	2,000,000
		CLAIMS-MADE X OCCUR	X		CAU531642-1		11/1/2024	11/1/2025	DAMAGE TO RENTED PREMISES (Ea occurrence	ce) §	3	1,000,000
									MED EXP (Any one perso	on) §	3	5,000
									PERSONAL & ADV INJUR	RY \$	5	2,000,000
	GEN	N'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE		6	2,000,000
		POLICY PRO- LOC							PRODUCTS - COMP/OP	AGG §	8	2,000,000
		OTHER:								9	8	
Α	AUT	OMOBILE LIABILITY							COMBINED SINGLE LIMI (Ea accident)	IT §	5	2,000,000
		ANY AUTO	Y		CAU531642-1		11/1/2024	11/1/2025	RODII V IN II IRV (Per ners	eon)	:	

OWNED AUTOS ONLY SCHEDULED AUTOS BODILY INJURY (Per accident)
PROPERTY DAMAGE
(Per accident) HIRED AUTOS ONLY NON-OWNED AUTOS ONLY **UMBRELLA LIAB OCCUR EACH OCCURRENCE EXCESS LIAB** CLAIMS-MADE **AGGREGATE** DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY PER STATUTE ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT N/A E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT Directors & Officers 11/1/2025 768629816 11/1/2024 2,000,000 Deductible: \$2,500 X

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Please see Certificate of Property, Acord 24, for building values.

CERTIFICATE HOLDER

RealManage Family of Brands - Vision Community Management 16625 South Desert Foothills Pkwy Phoenix, AZ 85048

CANCELLATION

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

Dont



November 15, 2024

Cave Creek Villas Homeowners Association

Dear Community Members,

Socher Insurance Agency has placed coverage for the Association's Property and General Liability effective Nov. 01, 2024 to Nov 01, 2025. This letter is to advise you of the building coverage provided for the Association and what type of personal insurance coverage you should purchase as a Unit Owner.

FACTS YOU SHOULD KNOW ABOUT THE ASSOCIATION'S BLANKETED PROPERTY COVERAGE:

- 1. The Association currently has blanketed property coverage for the common area and buildings provided by American Alternative Insurance Corporation.
- 2. The Association has a property deductible of \$10,000 and \$20,000 per unit water.
- 3. The American Alternative Policy contains an endorsement for coverage for the interior of the unit, not including Betterments and Improvements. The Policy covers interior components and will provide coverage to restore the interior of the unit back to the original condition up to original construction specifications.
- 4. You as the individual Unit Owner need to provide coverage for any upgrades beyond original construction specifications, and for your personal property residing within the unit.

Below are some coverage options that we recommend you as the unit owner have on your personal insurance policy, if these coverage options are not included on your current policy, we suggest adding them. Please contact your individual personal lines brokers for details about how to include these options.

Unit Owners Insurance Policy:

An insurance policy may be purchased through your personal Insurance Agent/ Broker. We suggest you include the following options:

- Building/Property Coverage: Building/structural coverage that the Association will not provide, I.E., interior upgrades
 beyond original construction specifications.
- **Personal Content Coverage:** Coverage for any personal items that are yours and not the Association's, as the Association will not cover these items at the time of loss. For example: furniture, jewelry, clothing, laptop computers, televisions., etc.
- **Deductible reimbursement**: If the loss comes from the interior of the unit and the Association charges you the deductible for the claim, this coverage should "reimburse" you for the Association's deductible once you pay your personal insurance policy deductible.
- Personal Liability. Protects yourself from liability losses that occur from within your unit (like a slip and fall).
- Loss of Use If there is a loss at your unit and you have to stay off premises during the rebuilding process, this coverage would take care of this extra expense.
- Loss Assessment for Property/Liability and/or Earthquake If a covered loss exceeds the limits of Insurance coverage provided by the Association, the Association would have a special assessment. This option would cover your portion of the special assessment, less your personal policy deductible.

To request a Certificate or Evidence of Insurance, please go to www.hoainsurance.net and select the green Services box, then Request a Certificate and follow the instructions.

If you need to make a claim, please call your community management company; RealManage Family of Brands | Vision Community Management; 480-759-4945.

Socher Insurance Agency specializes in coverage for associations, not individual property owners. You should discuss these coverage options with your personal lines agent.



10/31/2024

Cave Creek Villas Homeowners Association Disclosure Summary Form

Property: American Alternatic Insurance Corporation: 11/1/2024 - 11/1/2025 \$29,875,000 Special Form, (wind included) Guaranteed Replacement Cost with No Coinsurance, a \$10,000 Deductible per Occurrence, and a \$20,000 water deductible per unit. Equipment Breakdown is included.

General Liability: American Alternatie Insurance Corporation: 11/1/2024 - 11/1/2025 \$2,000,000 per Occurrence/General Aggregate with a \$0 Deductible. \$2,000,000 Non-Owned and Hired Automobile Liability is included in this policy.

Umbrella Liability: No Coverage through our Agency.

<u>Directors' and Officers' Liability: Continental Casualty Company: 11/1/2024 - 11/1/2025</u> \$2,000,000 per Occurrence/General Aggregate with a \$2,500 Retention per Occurrence.

Employee Dishonesty: Continental Casualty Company: 11/1/2024 - 11/1/2025 \$405,000 per Occurrence with a \$1,000 Deductible.

Workers' Compensation: No Coverage through our Agency.

Earthquake Insurance: No Coverage through our Agency.

Flood: No Coverage through our Agency.

This summary of the Association's policies of insurance provides only certain information and should not be considered a substitute for the complete policy terms and conditions contained in the actual policies of insurance. Any Association Member may, upon request and provision of reasonable notice, review the Association's Insurance Policies and, upon request and payment of reasonable duplication charges, obtain copies of those policies. Although the Association maintains the Policies of Insurance specified in this summary, the Association's Policies of Insurance may not cover your property, including personal property or real property improvements to or around your dwelling, or personal injuries or other losses that occur within or around your dwelling. Even if a loss is covered, you may nevertheless be responsible for paying all or a portion of any Deductible that applies. Association Members should consult with their individual Insurance Broker or Agent for appropriate additional coverage.

For lender and/or unit specific Evidence of Insurance please call EOI Direct at 877-456-3643. For general proof of insurance please contact Socher Insurance at 877-317-9300