

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 01/03/2025

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C B	ERT ELC	IFICATE DO	ES NOT AFFIR	AS A MATTER OF INFORMATION (RMATIVELY OR NEGATIVELY AMEN F INSURANCE DOES NOT CONSTI ER, AND THE CERTIFICATE HOLDER.	ID, EXTEND OR TUTE A CONTR	ALTER THE CO	OVE	RAGE AFFORDED	BY TH	IE POLICIES		
PRO	DUCE	R			CONTACT NAME:	CONTACT NAME:						
Soc	her	Insurance Ag	encv. Inc.			PHONE (A/C, No, Ext): (877) 317-9300 FAX (A/C, No): (877) 317						
790	Sto	Insurance Ag	e, Suite 403			ADDRESS: info@hoainsurance.net PRODUCER CUSTOMER ID: LACOLIN-01						
Piea	san	ton, CĂ 94588	5		PRODUCER							
					CUSTOMER ID:							
						INSURER(S) AFFORDING COVERAGE						
INSU	IRED				INSURER A : LIC	INSURER A : Lio Insurance Company						
		La Colir	a Homeowners	s Association	INSURER B :							
				Brands Vision Community Managen	10 INSURER C :	INSURER C :						
			Desert Foothil	IS PKWY	INSURER D :	INSURER D :						
		Fildelin	, AZ 05040		INSURER E :	INSURER E :						
					INSURER F :							
со	VER	AGES		CERTIFICATE NUMBER:			RE	VISION NUMBER:				
T IN C	HIS I IDIC/ ERTI	S TO CERTIFY ATED. NOTWI FICATE MAY B	THAT THE POLIC THSTANDING AN E ISSUED OR M	ROPERTY (Attach ACORD 101, Additional Remark CIES OF INSURANCE LISTED BELOW HAV IY REQUIREMENT, TERM OR CONDITION AY PERTAIN, THE INSURANCE AFFORDE	/E BEEN ISSUED 1 OF ANY CONTRAC D BY THE POLICIE	TO THE INSURED N. CT OR OTHER DOC	UM	ENT WITH RESPECT TO	O WHIC	CH THIS		
INSR		JSIONS AND C		SUCH POLICIES. LIMITS SHOWN MAY HA'	POLICY EFFECTIVE	POLICY EXPIRATION		COVERED PROPERTY		LIMITS		
	v				DATE (MM/DD/YYYY)	DATE (MM/DD/YYYY)						
~	X	_		HOA1000028725-01	01/05/2025	01/05/2026		BUILDING	\$			
	CAL	JSES OF LOSS	DEDUCTIBLES	HOA 1000028725-01	01/05/2025	01/05/2026		PERSONAL PROPERTY	\$			
		BASIC	BUILDING 1,000					BUSINESS INCOME	\$			
		BROAD	CONTENTS	-				EXTRA EXPENSE	\$			
	X	SPECIAL						RENTAL VALUE	\$			
		EARTHQUAKE						BLANKET BUILDING	\$			
		WIND						BLANKET PERS PROP	\$			
		FLOOD						BLANKET BLDG & PP	\$			
				-			x	Common Outdoor Prop.	\$	100,000		
				-			X	Trees/Shrubs/Plants	\$	30,000		
			-									
	-		-	TYPE OF POLICY				-	\$			
	CAL	JSES OF LOSS						-	\$			
		NAMED PERILS		POLICY NUMBER				_	\$			
L								De des dible \$4.000	\$			
A	X	CRIME					X	Deductible \$1,000	\$	250,000		
	TYF	TYPE OF POLICY							\$			
	Fic	delity Bond		HOA1000028725-01	01/05/2025	01/05/2026			\$			
		BOILER & MACH	INERY /						\$			
		EQUIPMENT BR	EAKDOWN					1	\$			
									\$			
								-	\$			
Spe	cial I	Form, 100% Re	eplacement Cos	ACORD 101, Additional Remarks Schedule, may be t on an agreed value with no coinsuran	ce. 111 Units.			1				
CE	RTIF	ICATE HOLI	DER			CANCELLATION						
		For Info	Only		THE EXPIRA	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 RE	AUTHORIZED REPRESENTATIVE KAYLARA						

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CERTIFICATE OF LIABILITY INSURANCE

DATE	(MM/DD/YYYY)
4	1212025

LACOLIN-01

	1/3/2025										
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.											
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:											
Socher Insurance Agency, Inc. PHONE 7901 Stoperidge Drive, Suite 403 FAX (A/C, No, Ext): (877) 317-9300):(877) 317-9305										
Pleasanton, CA 94588											
INSURER(S) AFFORDING COVERAGE	NAIC #										
INSURER A : Lio Insurance Company											
INSURED La Colina Homeowners Association											
RealManage Family of Brands Vision Community Manageme											
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 INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESP.											
CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT											
EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.											
INSR LTR TYPE OF INSURANCE ADDL SUBR INSD POLICY NUMBER POLICY EFF (MM/DD/YYYY) POLICY EXP (MM/DD/YYYY)	-										
A X COMMERCIAL GENERAL LIABILITY	\$ 2,000,000										
CLAIMS-MADE X OCCUR HOA1000028725-01 1/5/2025 1/5/2026 DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000										
MED EXP (Any one person)	\$ 5,000										
PERSONAL & ADV INJURY	\$ 2,000,000										
GEN'L AGGREGATE LIMIT APPLIES PER:	\$ 4,000,000										
POLICY PRO- JECT LOC PRODUCTS - COMP/OP AGO	s 4,000,000										
OTHER: COMBINED SINGLE LIMIT	\$										
(Ea accident)	\$ 1,000,000										
ANY AUTO HOA1000028725-01 1/5/2025 1/5/2026 BODILY INJURY (Per person)	\$										
OWNED AUTOS ONLY AUTOS	t) \$										
X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY PROPERTY DAMAGE (Per accident)	\$										
	\$										
UMBRELLA LIAB OCCUR	\$										
AGGREGATE AGGREGATE	\$										
DED RETENTION \$ WORKERS COMPENSATION PER	\$										
AND EMPLOYERS' LIABILITY Y/N											
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	\$										
If yes, describe under	<u>E</u> \$										
DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMI' B Directors & Officers 768591049 1/5/2025 1/5/2026 Deductible \$1,000	s 1,000,000										
	1,000,000										
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Coverage is for the Common Area Only. Coverage does not extend to the lots and/or any privately owned units whether owner or tenant occupied within the											
PUD.	-										

CERTIFICATE HOLDER	CANCELLATION		
For Info Only	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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The Leader in HOA Insurance Since 1987

1/3/2025

La Colina Homeowners Association Civil Code 5300(b)(9) Disclosure Summary Form

<u>**Property</u>: LIO Insurance Company: 1/5/2025 - 1/5/2026
 \$100,000 Common Area Limit with a \$1,000 Deductible.
 \$30,000 Trees, Shrubs, and Plants Limit with a \$1,000 Deductible.

<u>General Liability:</u> LIO Insurance Company: 1/5/2025 - 1/5/2026 \$2,000,000/\$4,000,000 per Occurrence/General Aggregate with a \$0 Deductible. \$1,000,000 Non-Owned and Hire Automobile Liability is included in this policy.

<u>Umbrella Liability:</u> No Coverage through our Agency.

<u>Directors' and Officers Liability:</u> Continental Casualty Insurance Company: 1/5/2025 - 1/5/2026 \$1,000,000 per Occurrence and Annual Aggregate with a \$1,000 retention per Occurrence.

Employee Dishonesty: LIO Insurance Company: 1/5/2025 - 1/5/2026 \$250,000 ALS per Occurrence with a \$1,000 Deductible.

Workers' Compensation: No Coverage through our Agency.

Equipment Breakdown Coverage: 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, as required by subdivision (b) of Section 5300 of the Civil Code, 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