

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/27/2025

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:			
LaBarre/Oksnee Insurance 30 Enterprise, Suite 180 Aliso Viejo CA 92656			FAX (A/C, No): 949-588-1275		
		E-MAIL ADDRESS: proof@hoa-insurance.com			
•		INSURER(S) AFFORDING COVERAGE	NAIC#		
		INSURER A: Accelerant National Insurance	10220		
INSURED	THEPOIN-01	ınsurer в : Allied World Insurance Company	22730		
The Pointe Community Associatic/o Vision Community Mgmt 16625 S. Desert Foothills Pkwy Phoenix AZ 85048	ion	INSURER C: The Hanover Insurance Co.	22292		
		INSURER D : PMA Insurance Group	12262		
		INSURER E: Philadelphia Indemnity Ins. Co			
		INSURER F:			
COVEDACES	CEDTIFICATE NUMBER, 400022602	DEVISION NUM	ADED.		

COVERAGES CERTIFICATE NUMBER: 408833682 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	NSR ADD CONDITIONS OF SOCH POLICIES. LIMITS SHOWN MAT HAVE BEEN REDUCED BY PAID CLAIMS.							
LTR		INSD V		POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	S
Α	X COMMERCIAL GENERAL LIABILITY	Υ		N030PK1201-02	1/28/2025	1/28/2026	EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000
	CLAIMS-MADE X OCCUR						PREMISES (Ea occurrence)	\$ 100,000
							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			N030PK1201-02	1/28/2025	1/28/2026	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	ANY AUTO						BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS ONLY AUTOS						BODILY INJURY (Per accident)	\$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
								\$
В	X UMBRELLA LIAB X OCCUR			PRP-229824000-00-2219727	1/28/2025	1/28/2026	EACH OCCURRENCE	\$5,000,000
	X EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$5,000,000
	DED RETENTION\$							\$
С	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			W2Y-J312125-03	2/9/2025	2/9/2026	X PER OTH- STATUTE ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	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 D E	Property Crime/Fidelity Directors & Officers	Y		N030PK1201-02 4125011373844Y PCAP037831-0223	1/28/2025 1/28/2025 1/28/2025	1/28/2026 1/28/2026 1/28/2026	\$10,000/\$25,000 Ded \$5,000 Deductible \$5,000 Deductible	\$11,755,905 \$1,000,000 \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) HOA consists of 225 total units (63 Courthomes / 162 Single-Family Homes). Located in Phoenix, AZ.

Property 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	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
16625 S Desert Foothills Pkwy Phoenix AZ 85048	AUTHORIZED REPRESENTATIVE

AGENCY C	USTOMER ID:	THEPOIN-01
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LOC #:



ADDITIONAL REMARKS SCHEDULE

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AGENCY LaBarre/Oksnee Insurance		NAMED INSURED The Pointe Community Association c/o Vision Community Mgmt		
POLICY NUMBER		16625 S. Desert Foothills Pkwy Phoenix AZ 85048		
CARRIER	NAIC CODE			
		EFFECTIVE DATE:		
ADDITIONAL REMARKS				

EFFECTIV	/E DATE:			
ADDITIONAL REMARKS				
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,				
FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURAN	<u>DE</u>			
Property Coverage:				
Courthomes: Single Entity Coverage (Walls In - Excluding Improvements and Betterment				
Single-Family Homes: No coverage for residential homes. Coverage is for COMMON AREAS ONLY				
Coverage Includes: \$25,000 Water Damage Deductible / \$10,000 All Other Peril Deductible Special Form with 100% Guaranteed Replacement Cost Wind / Hail (Excludes direct loss to trees/shrubs) Equipment Breakdown Building Ordinance or Law A+B+C Inflation Guard and/or limits are reviewed yearly to ensure 100% Replacement Cost Severability of Interest / Separation of Insureds Waiver of Rights of Recovery No Co-Insurance D&O is a Claims-Made Policy				





The Pointe Community Association Unit Owner Coverage Letter

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).

FOR THE COURTHOMES: 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, EXCLUDING upgrades, betterments & Improvements). 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.

SINGLE FAMILY DWELLINGS: Coverage is common area only, there is no coverage for the homes.

The Association has a \$25,000 Water Damage Deductible and a \$10,000 All Other Peril Deductible, which depending on the circumstances of the loss, could be your responsibility as the homeowner.

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 Unit Owner's personal property.
- Please be sure to notify your personal insurance agent that this association carries a \$25,000 Water Damage
 Deductible and a \$10,000 All Other Peril Deductible so that you are covered in the event you are responsible for that
 Deductible or for a loss sustained within your Unit that is less than the Deductible.
- Building upgrades, betterments and improvements can be covered on your personal insurance. Betterments,
 Improvements or Upgrades to your Unit need to be covered by you as an owner to cover any gaps in coverage in the
 event of loss. The association insurance coverage will be limited to "industry standard materials" of like, kind and quality
 for the replacement of finished flooring, wall coverings, fixtures and cabinets.
- 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 to all homeowners in the association 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.







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.