

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 02/19/2025

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.

COVEDAC	CERTIFICATE NUM	DED	_	•	DEVICION NU	MDED.		_
	PHOENIX,	ΑZ	85048-8470	INSURER F :				
				INSURER E :				
				INSURER D :				
	C/O VISION COMMUNITY MGMT 10025 S DES	EKI	FOOTHILLS P	INSURER C:				
	C/O VISION COMMUNITY MGMT 16625 S DES	CDT	FOOTHILL & D	INSURER B:				
INSURED	CANYON HEIGHTS OWNERS ASSN			INSURER A :	State Farm Fire and Casualty Company		25143	_
INSURED								_
	Peoria.	ΑZ	85381-4761		INSURER(S) AFFORDING COVERAGE		NAIC #	
				PRODUCER CUSTOMER ID	1			
	15256 N 75th Ave Ste 320			E-MAIL ADDRESS:	kevin.mcgraw.mdmg@statefarm.com			
State Farm	Kevin McGraw			PHONE (A/C, No, Ext):	(623) 412-0888	FAX (AC, NO):	(623) 412-1025	
PRODUCER				INMINIE.	Kevin McGraw			
								_

CERTIFICATE NUMBER: REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required) REFER TO ACORD 101.

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			SURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
		PROPERTY					BUILDING	\$ \$34,400
	CAL	JSES OF LOSS	DEDUCTIBLES				PERSONAL PROPERTY	\$
		BASIC	BUILDING \$1,000.00				BUSINESS INCOME	\$ SEE ACORD 101
		BROAD	CONTENTS		12/01/2024		EXTRA EXPENSE	\$ SEE ACORD 101
		SPECIAL		93-BJ-D879-1		12/01/2025	RENTAL VALUE	\$ SEE ACORD 101
		EARTHQUAKE		93-03-0079-1		12/01/2025	BLANKET BUILDING	\$
		WIND					BLANKET PERS PROP	\$
		FLOOD					BLANKET BLDG & PP	\$
								\$
								\$
		INLAND MARINE	=	TYPE OF POLICY				\$
	CAUSES OF LOSS							\$
		NAMED PERILS		POLICY NUMBER				\$
								\$
		CRIME						\$
	TYPE OF POLICY							\$
								\$
	BOILER & MACHINERY / EQUIPMENT BREAKDOWN							\$
	EQUIFMENT BREARDOWN		LANDOWN					\$
		·						\$
								\$

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

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		AUTHORIZED REPRESENTATIVE		
Phoenix,	AZ 85048-8470	IF SIGNATURE IS REQUIRED, PLEASE CONTACT AGENT.		

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AGENCY CUSTOMER ID:	
LOC#	

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Kevin McGraw POLICY NUMBER 93-BJ-D879-1 CARRIER

ADDITIONAL REMARKS SCHEDULE

	NAMED INSURED
	CANYON HEIGHTS OWNERS ASSN
NAIC CODE	

12/01/2024

Forms. Options and Endorsements:

ADDITIONAL REMARKS

State Farm Fire and Casualty Company

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM.				
FORM NUMBER: 24	FORM TITLE: Certificate of Property Insurance			

EFFECTIVE DATE:

Unit Owner:

CANYON HEIGHTS OWNERS ASSN C/O VISION COMMUNITY MGMT - 16625 S Desert Foothills Pkwy - Phoenix, - AZ - 85048-8470 - Unit Loan Number:1 - Number Of Units: 0109

25143

Association Type: Residential Community Association Policy

Forms, Options and Endorsements:

, I		, I	
CMP-4100	Businessowners Coverage Form	CMP-4814	Dir & Officers \$1,000,000
CMP-4203.3	Amendatory Endorsement	FE-6999.3	Terrorism Insurance Cov Notice
CMP-4550	Residential Community Assoc	CMP-4710	Emp Dishonesty \$25,000
CMP-4508	Money and Securities	CMP-4705.2	Loss of Income & Extra Expense
FE-3650	Actual Cash Value Endorsement	CMP-4573.2	Policy Endorsement
CMP-4532	Exclusion Cyber Incident		•

Coverages:

\$1,000,000
\$6,000
\$2,000,000
\$2,000,000

Coverage

Unless otherwise endorsed, this policy provides replacement cost coverage on described property and common areas detailed within the Association Covenants, Conditions, and Restrictions (CC&Rs) including the following types of property within a unit, regardless of ownership:

- 1. Fixtures, improvements and alterations that are a part of the building or structure; and
- 2. Appliances such as those used for refrigerating, ventilating, cooking, dishwashing, laundering, security or housekeeping.

Replacement cost coverage is subject to the terms and conditions of the policy and any endorsements.

Coverage under this policy may have been modified to provide actual cash value coverage rather than replacement cost coverage, or to remove specified property from coverage, if any endorsement containing in its title "ACV" or "Actual Cash Value," or "Additional Property Not Covered" is identified on this Certificate of Insurance.

Endorsements: FE-3650, FE-3653, FE-3658, and FE-3659 (Actual Cash Value) - These endorsements describe what the term "actual cash value" means where used in the policy. *However, these endorsements do not change any replacement cost coverage provided by the policy.*

This policy provides coverage on a standalone/individual condominium association.

Commercial General Liability

State Farm refers to this coverage as Business Liability Coverage. Coverage amount shown is Per Occurrence.

Loss of Rents, Loss of Income and Extra Expense

If this coverage is shown, limits are "Actual Loss Sustained". Contact the agent to confirm the number of day's coverage.