CJIMINEZ



DATE (MM/DD/YYYY) 4/2/2025

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 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.

									require an endorse	ement.	A stat	tement on	
Soc	DUCER her Insu	ırance Agency, Inc.				NAME:		217-9300	FAX	(8 ¹	77) 31	17-9305	
7901 Stoneridge Drive, Suite 403					E-MAIL ADDRESS: info@hoainsurance.net								
							INSURER(S) AFFORDING COVERAGE						
						INSURER A: American Alternative Insurance Corporation							
INSL	INSURED						R в : Federal	Insurance	Company				
Chateau De Vie Two Townhouses Association						INSURER C: Continental Casualty Company							
			PHONE (A/C, No, Ext): (877) 317-9300 FAX (A/C, No): (877) 317-9305										
		Phoenix, AZ 85048				INSURE	RE:						
						INSURE	RF:						
СО	VERAG	ES CER	TIFICA	TE N	NUMBER:				REVISION NUMBE	R:			
IN	IDICATE	D. NOTWITHSTANDING ANY R	EQUIRE	MEN	NT, TERM OR CONDITION	N OF A	ANY CONTRAC	CT OR OTHER	R DOCUMENT WITH R	ESPEC	T TO W	HICH THIS	
										ECT TO	ALL TH	IE TERMS,	
INSR LTR	INSR TYPE OF INSURANCE				POLICY NUMBER								
Α	X cor	MMERCIAL GENERAL LIABILITY					,	,	EACH OCCURRENCE	\$		1,000,000	
		CLAIMS-MADE X OCCUR	CAU507812-6		3/25/2025	3/25/2026		ce) \$		1,000,000			
									,			5,000	
												4 000 000	

Α	X	COMMERCIAL GENERA	AL LI	ABILITY					EACH OCCURREN	ICE	\$ 1,000,000
		CLAIMS-MADE	X	OCCUR		CAU507812-6	3/25/2025	3/25/2026	DAMAGE TO REN PREMISES (Ea oc	TED currence)	\$ 1,000,000
									MED EXP (Any one	,	\$ 5,000
									PERSONAL & AD\	/ INJURY	\$ 1,000,000
	GEN	N'L AGGREGATE LIMIT A	PPLIE	S PER:					GENERAL AGGRE	GATE	\$ Included
		POLICY PRO- JECT		LOC					PRODUCTS - CON	IP/OP AGG	\$ 1,000,000
		OTHER:									\$
Α	AUT	OMOBILE LIABILITY							COMBINED SINGL (Ea accident)	E LIMIT	\$ 1,000,000
		ANY AUTO	,			CAU507812-6	3/25/2025	3/25/2026	BODILY INJURY (F	Per person)	\$
		OWNED AUTOS ONLY	AUT	-					BODILY INJURY (F		\$
	X	HIRED X	NON AUT	I-OWNED OS ONLY					PROPERTY DAMA (Per accident)	.GE	\$
											\$
В	X	UMBRELLA LIAB	X	OCCUR					EACH OCCURREN	ICE	\$ 10,000,000
		EXCESS LIAB	(CLAIMS-MADE		G75087792	3/25/2025	3/25/2026	AGGREGATE		\$ 10,000,000
		DED X RETENTIO	ON \$	0							\$
	WOF	RKERS COMPENSATION EMPLOYERS' LIABILITY	′						PER STATUTE	OTH- ER	
	ANY PROPRIETOR PARTIER EXECUTIVE				N/A				E.L. EACH ACCIDE	ENT	\$
		CER/MEMBER EXCLUDE ndatory in NH)	יטי						E.L. DISEASE - EA	EMPLOYEE	\$
	DÉS	s, describe under CRIPTION OF OPERATIO	ONS b	elow					E.L. DISEASE - PC		\$
С	Dire	ectors & Officers				768600686	3/25/2025	3/25/2026	deductible: \$	1,000	1,000,000

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 CANCELLATION

> RealManage Family Of Brands | Vision Community Management 16625 S 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



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 03/21/2025

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 Insu	rance Agency, Inc.	PHONE (A/C, No, Ext): (877) 317-9300 FAX (A/C, No): (877)	317-9305						
7901 Stoner Pleasanton.	idge Drive, Suite 403 CA 94588	E-MAIL ADDRESS: info@hoainsurance.net							
,	er Insurance Agency, Inc. Stoneridge Drive, Suite 403 anton, CA 94588 ED Chateau De Vie Two Townhouses Association	PRODUCER CUSTOMER ID: CHATDEV-01							
		INSURER(S) AFFORDING COVERAGE	NAIC#						
INSURED		INSURER A: American Alternative Insurance Corporation							
	Chateau De Vie Two Townhouses Association	INSURER B: Continental Casualty Company							
	RealManage Family Of Brands Vision Community Managem	INSURER C:							
		INSURER D:							
	Priderita, AZ 05040	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.

COLORIONS AND CONDITIONS OF SOCIET COLORIS. ELIVINGS SHOWN WAT HAVE BEEN REDUCED BY FAID CLAIMS.									
	TYPE OF INSURANCE		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)		COVERED PROPERTY	LIMITS	
X	PROPERTY						BUILDING	\$	
CAL	JSES OF LOSS	DEDUCTIBLES	CAU507812-6	03/25/2025	03/25/2026		PERSONAL PROPERTY	\$	
	BASIC	BUILDING 10 000					BUSINESS INCOME	\$	
	BROAD	CONTENTS					EXTRA EXPENSE	\$	
Х	SPECIAL	OONTENTO					RENTAL VALUE	\$	
	EARTHQUAKE						BLANKET BUILDING	\$	
	WIND						BLANKET PERS PROP	\$	
	FLOOD					X	BLANKET BLDG & PP	\$	21,300,000
X	Bldg Ord A Incl					X	Bldg Ord B	\$	904,000
Х	Water Ded per	10,000				Х	Bldg Ord C	\$	1,809,000
	INLAND MARINE		TYPE OF POLICY					\$	
CAL	JSES OF LOSS							\$	
	NAMED PERILS		POLICY NUMBER					\$	
								\$	
Х	CRIME					Х	Ded \$1,000	\$	300,000
TYF	PE OF POLICY							\$	
Fic	idelity Bond		768600686	03/25/2025	03/25/2026			\$	
	BOILER & MACHINERY /							\$	
	— EQUIPMENT BREAKDOWN							\$	
								\$	
							1	\$	
1	X CAU	TYPE OF INS X PROPERTY CAUSES OF LOSS BASIC BROAD X SPECIAL EARTHQUAKE WIND FLOOD X BIdg Ord A Incl X Water Ded per INLAND MARINE CAUSES OF LOSS NAMED PERILS X CRIME TYPE OF POLICY FIDELITY BOND BOILER & MACH	TYPE OF INSURANCE X PROPERTY CAUSES OF LOSS DEDUCTIBLES BASIC 10,000 BROAD CONTENTS X SPECIAL EARTHQUAKE WIND FLOOD X BIdg Ord A Inci X Water Ded per 10,000 INLAND MARINE CAUSES OF LOSS NAMED PERILS X CRIME TYPE OF POLICY Fidelity Bond	TYPE OF INSURANCE X PROPERTY CAUSES OF LOSS DEDUCTIBLES BASIC 10,000 BROAD CONTENTS X SPECIAL EARTHQUAKE WIND FLOOD X Bidg Ord A Incl X Water Ded per 10,000 INLAND MARINE CAUSES OF LOSS NAMED PERILS TYPE OF POLICY Fidelity Bond CAUSES OF LOSS BOILER & MACHINERY /	TYPE OF INSURANCE POLICY NUMBER POLICY EFFECTIVE DATE (MM/DD/YYYY) X PROPERTY CAUSES OF LOSS DEDUCTIBLES BASIC BUILDING 10,000 BROAD CONTENTS X SPECIAL EARTHQUAKE WIND FLOOD X BIdg Ord A Incl X Water Ded per 10,000 INLAND MARINE CAUSES OF LOSS NAMED PERILS POLICY NUMBER POLICY NUMBER POLICY NUMBER O3/25/2025 TYPE OF POLICY TORROW DATE (MM/DD/YYYY) O3/25/2025 O3/25/2025	TYPE OF INSURANCE	TYPE OF INSURANCE	TYPE OF INSURANCE POLICY NUMBER POLICY STREETIVE DATE (MM/DD/YYYY) POLICY SUBJECT STREETIVE DATE (MM/DD/YYYYY) POLICY STREETIVE DATE (MM/DD/YYYY) POLICY STREETIVE DATE (MM/DD/YYYYY) POLICY STREETIVE DATE (MM/DD/YYYY) POLICY STREETING TO STREET DATE (MM/DD/YYYYYYYYYYYYYYYYYYYYYYYYYYYYYYYYY	TYPE OF INSURANCE POLICY NUMBER POLICY EFFECTIVE DATE (MM/DD/YYYY) AND ATE (MM/DD/YYYY) DATE (MM/DD/YYYY) POLICY EFFECTIVE DATE (MM/DD/YYYY) DATE (MM/DD/YYY) DATE (MM/DD/YY) DATE (MM/DD/YY) DATE (MM/DD/YY) DATE (MM/DD/YY) DATE (MM/DD/YY)

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. 83 Units. Policy is Walls in excluding Betterments & Improvements. Severability of Interest included on Package Policy. Common elements included on policy. No inflation guard due to GRC policy.

CERTIFICATE HOLDER

RealManage Family Of Brands | Vision Community Management

16625 S 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

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Chateau De Vie Two Townhouses Association Disclosure Summary Form

Property: American Alternative Insurance Company: 3/25/2025 - 3/25/2026 \$21,300,000 Special Form (wind included), Guaranteed Replacement Cost Basis with no co-insurance and a \$10,000 per occurrence / \$10,000 water per unit deductible. Equipment breakdown coverage is included.

General Liability: American Alternative Insurance Company: 3/25/2025 - 3/25/2026 \$1,000,000 per Occurrence/ no General Aggregate with a \$0 Deductible. \$1,000,000 Non-Owned and Hired Automobile Liability is included in this policy.

<u>Umbrella Liability: Federal Insurance Company: 3/25/2025 - 3/25/2026</u> \$10,000,000 Each Occurrence/General Aggregate with a \$0 self insured retention each occurrence.

<u>Directors' and Officers' Liability: Continental Casualty Company: 3/25/2025 - 3/25/2026</u> \$1,000,000 per Occurrence/General Aggregate with a \$1,000 Retention per Occurrence.

Employee Dishonesty: Continental Casualty Company: 3/25/2025 - 3/25/2026 \$300,000 per Occurrence with a \$0 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**