

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/7/2025

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).

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PRODUCER		CONTACT NAME:	
LaBarre/Oksnee Insurance 30 Enterprise, Suite 180		PHONE (A/C, No, Ext): 800-698-0711	FAX (A/C, No): 949-588-1275
Aliso Viejo CA 92656		E-MAIL ADDRESS: proof@hoa-insurance.com	
		INSURER(S) AFFORDING COVERAGE	NAIC#
		INSURER A: Philadelphia Indemnity Ins. Co	18058
INSURED	THECOVE-01	INSURER B: Federal Insurance	20281
The Cove Homeowners Assoc dba Laguna Shores c/o Vision Community Mgmt		INSURER C: PMA Insurance Group	12262
16625 S. Desert Foothills Pkwy		INSURER D: Continental Casualty Company	20443
Phoenix AZ 85048		INSURER E:	
		INSURER F:	
COVERAGES CERTIFICATE NUMBER: 400	00444047	DEVICION NUM	ADED.

COVERAGES CERTIFICATE NUMBER: 1685114017 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.

NSR LTR		TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
Α	Χ	COMMERCIAL GENERAL LIABILITY	Y		PHPK2623542-002	11/8/2025	11/8/2026	EACH OCCURRENCE	\$1,000,000
		CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
								MED EXP (Any one person)	\$ 5,000
								PERSONAL & ADV INJURY	\$1,000,000
	GEN	N'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
	Х	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
		OTHER:						Deductible	\$ 15,000
Α	AUT	OMOBILE LIABILITY			PHPK2623542-002	11/8/2025	11/8/2026	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
		ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	\$
	Χ	HIRED X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
		7,67,65,61,12						, ,	\$
В	Χ	UMBRELLA LIAB X OCCUR			G7482769A	11/8/2025	11/8/2026	EACH OCCURRENCE	\$5,000,000
	Χ	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$5,000,000
		DED RETENTION\$							\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
	ANYF	PROPRIETOR/PARTNER/EXECUTIVE TIN	N/A					E.L. EACH ACCIDENT	\$
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		117.7					E.L. DISEASE - EA EMPLOYEE	\$
	If yes	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
A C D	Prop Crim Direc	perty ne/Fidelity ctors & Officers	Y		PHPK2623542-002 4125010468272Y 768583727	11/8/2025 11/8/2025 11/8/2025	11/8/2026 11/8/2026 11/8/2026	\$25,000 Deductible \$1,000 Deductible \$1,000 Deductible	\$47,264,641 \$725,000 \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) HOA consists of 173 units. Located in Gilbert, AZ.

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 CUSTOMER ID:	THECOVE-01
LOC #:	



ADDITIONAL REMARKS SCHEDULE

AGENCY LaBarre/Oksnee Insurance		NAMED INSURED The Cove Homeowners Assoc dba Laguna Shores c/o Vision Community Mgmt	
POLICY NUMBER		16625 S. Desert Foothills Pkwy Phoenix AZ 85048	
CARRIER	NAIC CODE		
ADDITIONAL DEMARKS		EFFECTIVE DATE:	
ADDITIONAL REMARKS			
THIS ADDITIONAL REMARKS FORM IS A SCHEDUL FORM NUMBER: $\phantom{00000000000000000000000000000000000$		NSURANCE	
FORM NUMBER: 25 FORM TITLE: CERTI			
Coverage is provided with the following insuring agreem ingle Entity Coverage (Walls In, excluding Improvement	nent: nts and Betterments)		
overage Includes:			
Special Form with 100% Replacement Cost for the entire	e project, including com	mon elements	
quipment Breakdown uilding Ordinance or Law A+B+C iflation Guard NOT available (limits reviewed annually everability of Interest / Separation of Insureds //aiver of Rights of Recovery o Co-Insurance	to ensure 100% Replac	ement Cost)	
&O is a claims-made policy			



LaBarre/Oksnee Insurance

The Cove Homeowners Assoc dba Laguna Shores 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). 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.

The Associations deductible is \$25,000, 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 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.

Be sure to touch base with your personal insurance agent today to ensure you are properly insured, or if you would like a competitive quote, you can call our Personal Lines Expert, **Tina Terrell**, direct at **(949) 215-9803**. Thank you!







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.