

**CERTIFICATE OF LIABILITY INSURANCE**

American Family Insurance Company   
 American Family Mutual Insurance Company, S.I. if selection box is not checked.  
 6000 American Pky Madison, Wisconsin 53783-0001

Insured's Name and Address  
 La Buena Vida Two Townhouse Association  
 Vision Community Management  
 16625 S Desert Foothills Pkwy  
 Phoenix, AZ 85048

Agent's Name, Address and Phone Number (Agt./Dist.)  
 Casey J Bell Agency, LLC  
 8325 W HAPPY VALLEY RD STE 110  
 PEORIA, AZ 85383  
 (623) 580-4800 (085/410)

**This certificate is issued as a matter of information only and confers no rights upon the Certificate Holder.  
 This certificate does not amend, extend or alter the coverage afforded by the policies listed below.**

COVERAGES							
This is to certify that 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.							
TYPE OF INSURANCE	POLICY NUMBER	POLICY DATE		LIMITS OF LIABILITY			
		EFFECTIVE (Mo, Day, Yr)	EXPIRATION (Mo, Day, Yr)				
<b>Homeowners/ Mobilehomeowners Liability</b>				Bodily Injury and Property Damage Each Occurrence \$ ,000			
<b>Boatowners Liability</b>				Bodily Injury and Property Damage Each Occurrence \$ ,000			
<b>Personal Umbrella Liability</b>				Bodily Injury and Property Damage Each Occurrence \$ ,000			
<b>Farm/Ranch Liability</b>				Farm Liability & Personal Liability Each Occurrence \$ ,000			
				Farm Employer's Liability Each Occurrence \$ ,000			
<b>Workers Compensation and Employers Liability †</b>				Statutory *****			
				Each Accident \$ ,000			
				Disease - Each Employee \$ ,000			
				Disease - Policy Limit \$ ,000			
<b>General Liability</b> <input checked="" type="checkbox"/> Commercial General Liability (occurrence) <input checked="" type="checkbox"/> AMERICAN FAMILY INS. <input type="checkbox"/>	91001-85479-88	06/20/2022	06/20/2023	General Aggregate \$ 4,000,000			
				Products - Completed Operations Aggregate \$ 4,000,000			
				Personal and Advertising Injury \$ 2,000,000			
				Each Occurrence \$ 2,000,000			
				Damage to Premises Rented to You \$ 50,000			
				Medical Expense (Any One Person) \$ 5,000			
				<b>Businessowners Liability</b>			
<b>Liquor Liability</b>				Common Cause Limit \$ ,000 Aggregate Limit \$ ,000			
				<b>Automobile Liability</b>	91001-85479-88	06/20/2022	06/20/2023
<input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input checked="" type="checkbox"/> Hired Auto <input checked="" type="checkbox"/> Nonowned Autos <input checked="" type="checkbox"/> AMERICAN FAMILY INS							
<b>Excess Liability</b>	91002-63019-62	06/20/2022	06/20/2023	<input checked="" type="checkbox"/> Commercial Blanket Excess \$ 5,000,000 <input checked="" type="checkbox"/> AMERICAN FAMILY INS			
<input checked="" type="checkbox"/> Commercial Blanket Excess <input checked="" type="checkbox"/> AMERICAN FAMILY INS							
<b>Other (Miscellaneous Coverages)</b> CONTINENTAL CASUALTY COMPANY POLICY #618912051-DIRECTORS & OFFICERS LIABILITY \$1,000,000-DED \$1000 - FIDELITY/CRIME \$500,000-DED \$2,500							
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / RESTRICTIONS / SPECIAL ITEMS This Association has 15 bldgs-72 units & Club House. Property Coverage is Special Form and is Walls-In (excluding betterments & improvements) with Guaranteed Replacement Cost * \$17,205,800 - Deductible \$10,000 - Auxiliary Structure \$300,000 - Ordinance Or Law Coverage A: \$17,205,800 - B&C \$300,000 per Bldg - Sewer Backup \$250,000 per Bldg - Wind & Hail Coverage Included. Severability of Interest Included - PMA Insurance Work Comp "If Any" Policy # 202201-11-71-66-9Y - Each Accident: \$1,000,000-Disease-Each Employee: \$1,000,000-Disease-Policy Limit: \$1,000,000 - Vision Community Management is an additional insured on the GL, D&O, Crime/Fidelity †The individual or partners <input type="checkbox"/> Have shown as insured elected to be covered under this policy. <input type="checkbox"/> Have not ††Products-Completed Operations aggregate is equal to each occurrence limit and is included in policy aggregate.							
<b>CERTIFICATE HOLDER'S NAME AND ADDRESS</b>			<b>CANCELLATION</b>				
Vision Community Management 16625 S Desert Foothills Pkwy Phoenix, AZ 85048			<input checked="" type="checkbox"/> Should any of the above described policies be cancelled before the expiration date thereof, the company will endeavor to mail *( 30 days) written notice to the Certificate Holder named, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives. *10 days unless different number of days shown.				
			<input type="checkbox"/> This certifies coverage on the date of issue only. The above described policies are subject to cancellation in conformity with their terms and by the laws of the state of issue.				
			DATE ISSUED 05/12/2022	AUTHORIZED REPRESENTATIVE Casey Bell			



American Family Insurance

Casey J. Bell Agency, LLC

8325 W Happy Valley Rd, Peoria, AZ 85383

Phone # 623-580-4800 / Fax # 623-587-5879

Email: cbagency@amfam.com

## La Buena Vida Two Townhouse Association

### 2022-2023 Unit Owner Insurance Letter

At the request of your Board of Directors, American Family Insurance has been selected to renew the Master Insurance Policy for your Association. We have enclosed a Certificate of Insurance for your review and records.

The Association's Master Policy covers many of the insurance needs for each Unit Owner. However, every Unit Owner that lives in their unit needs to have a personal HO-6 condominium policy for those items not covered by the Master Policy. If you own a unit but do not reside in it, or are renting a unit, please contact your personal insurance agent to discuss policy options to make sure you are adequately covered in the event of a loss.

In the event of a Master Policy covered loss, the Master Policy will pay to rebuild the building and the unit back to its original construction, **minus the Master Policy deductible of \$10,000. The Master Policy will not pay for any additions, upgrades, betterments, improvements or alterations made to the unit by any unit owner.**

Examples of covered losses include, but are not limited to: fire, lightning, windstorm, hail, explosion, smoke, vandalism, falling objects and sudden and immediate water escape or overflow. No coverage is provided for wear and tear, deterioration, damage by insects, settling or cracking, and there is no coverage for repeated leakage or seepage of water.

#### **A Unit Owner's personal HO-6 condominium insurance policy should include the following:**

- Coverage for Unit Owner's personal property, including theft of property.
- **Coverage for damaged property (claims) falling below the \$10,000 deductible, and coverage for what is excluded from the Master Policy, such as any additions, upgrades, betterments, improvements or alterations made to the unit since it was built.**
- A Loss Assessment Endorsement. This provides coverage in the event you as a Unit Owner are assessed by the Association for a covered loss.
- Coverage for the Unit Owner's personal liability.
- Additional Living Expenses/Loss of Use/Loss of Rents.
- Any other coverage you and your personal insurance agent deem necessary.

The amount of coverage and/or policy limits on the unit owner's personal policy is to be determined by the Unit Owner and his/her personal insurance agent. If you own a unit but do not reside in it, or are renting a unit, please contact your personal insurance agent to discuss policy options.

We strongly recommend that you contact your personal insurance agent and review your Association's CC&R's to make sure you are adequately insured in the event of a loss. If you do not have an HO-6 condominium policy or would like a competitive quote, please feel free to contact our personal lines department at the number below.

#### **Who To Call:**

Account Manager: Casey J. Bell Agency, LLC 623-580-4800

Certificates of Insurance: cbagency@amfam.com

Personal Lines Quotes: Teresa Weber 623-580-4800