

# **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 10/12/2022

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 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									
PRO	rtificate holder in lieu of such endors	seme	ent(s)		CONTACT Mike Stapley Agency Inc				
Mike Stapley Agency Inc					PHONE A/C, No, Ext): (480) 503-4450 FAX (A/C, No): (855) 557-8475				
4850 E Baseline Rd Ste 101					E-MAIL ADDRESS: mikestapleyagency@amfam.com				
	Mesa, AZ 85206 (480) 503-4450 (072/404)					INSURER(S) AFFORDING COVERAGE			
						INSURER A: American Family Mutual Insurance Company, S.I.			
INSURED Orange Tree Townhomes Corp					INSURER B :				
c/o Vision Community Management					INSURER C : INSURER D :				
	16225 S Desert Foothills Pkwy					INSURER D .			
Pho	Phoenix, AZ 85048					INSURER F :			
CO	COVERAGES CERTIFICATE NUMBER:					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   INDICY EFF   POLICY EFF   POLICY EXP									
INSR LTR	TYPE OF INSURANCE	INSR	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	;	
	AUTOMOBILE LIABILITY						BODILY INJURY (Per person)	\$	2,000,000
A		Y		04000 54040 80	11/01/2022	11/01/2023	BODILY INJURY (Per accident)	\$	2,000,000
	ALL OWNED SCHEDULED AUTOS			91000-54919-86			PROPERTY DAMAGE (Per accident)	\$ \$	2,000,000
	HIRED AUTOS AUTOS						BODILY INJURY	\$ \$	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$ \$	2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
							MED EXP (Any one person)	\$	5,000
Α		Y	91000-54919-86	01000 5/010 86	11/01/2022	11/01/2023	PERSONAL & ADV INJURY	\$	2,000,000
				91000-04919-00	11/01/2022	11/01/2023	GENERAL AGGREGATE	\$	4,000,000
	GEN'LAGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$	4,000,000
	X POLICY PROJECT LOC   X OTHER Crime/Fidelity						Deductible \$1,000	\$	300,000
							EACH OCCURRENCE	\$	1,000,000
Α	<b>EXCESS LIAB</b> CLAIMS-MADE			91000-59121-44	11/01/2022	11/01/2023	AGGREGATE	\$	1,000,000
	DED RETENTION \$ \$10,000.00							\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <u>Y / N</u>								
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N / A					E.L. EACH ACCIDENT	\$	
	(Mandatory in NH) If yes, describe under							\$	
	DÉSCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	
Α	Directors & Officers	Y		91000-54919-86	11/01/2022	11/01/2023	\$1,000,000 \$1,000 E	educt	ible
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)     11465 N 56th St, Scottsdale, AZ 85254. 45 Units/5 Buildings -     Property covered at GRC, bare walls - excludes walls in, betterments and improvements - \$5,000 deductible.     Includes Ordinance & Law, and Sewer Back Up.     Property Manager is included as Additional Insured on the GL, Crime/Fidelity and D&O.     CERTIFICATE HOLDER     Vision Community Management									
16225 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.				
					Michelle Cook				

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## Orange Tree Townhomes Corp

### **Master Insurance Program**

Key information regarding the association's master policy:

- The units are covered as originally built "Bare Walls"- excludes betterments and improvements, as outlined in the Governing Documents.
- The Master Insurance deductible is \$5,000 and is assessed exclusively against units benefiting from the claim.

#### Key information regarding unit owner's insurance needs:

- You need a condominium owner's policy to provide coverage for your personal property, building property that is your responsibility, loss assessment, personal liability, and other coverages you deem necessary.
- Your policy should be written to cover the Master Insurance deductible as part of your unit-owners policy.

#### **Certificate of Insurance**

• If you refinance or sell your unit, insurance copies may be requested by your mortgage broker, realtor, or directly by you. We do not charge for copies of your insurance.

#### <u>Claims</u>

• If you feel that your association needs to file a claim on the master policy, notify Vision Community Management at 480-759-4945.

#### **Claim mitigation partnership**

• Personal insurance customers are eligible to receive 75% off a home protection kit (SmartCam, Leak Sensor Kit, Motion Kit) with a discount code, or the system can be purchased for a one-time \$109 charge. www.hedgeprotect.com

#### Deductible waiver program:

- The unitowners policy should be written to provide coverage for the Master Insurance deductible, up to \$5,000.
- Furthermore, if your personal policy is with American Family and there is a claim involving both policies, your personal deductible will be waived.



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