

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 10/1/2017

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S). AUTHORIZED REPRESENTATIVE OR PRODUCER. AND THE ADDITIONAL INTEREST.

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AGENCY		Phone (A/C, No. Ext):	415-276-2811	COMPANY			
HUB International Insuran		(A) Affiliated FM Insurance Company (FM Global Group)					
580 California Street, Ste		(B) Federal Insurance Company					
San Francisco, CA 94104							
CA DOI License# 0757770	6						
FAX (A/C, No):	EMAIL ADDRE	sfcerts@	hubinternational.com				
CODE:							
AGENCY CUSTOMER ID#:							
INSURED				LOAN NUMBER POLICY NUMBER			IBER
Alicante Owners Associatico Action Property Manage				A) SG780 B) 8224-33			
2603 Main Street, Suite 50		EFFECTIVE DATE	EXPIRATION DATE		CONTINUED UNTIL		
•		10/1/2017	10/1/2018		TERMINATED IF CHECKED		
Irvine, CA 92614-4261				THIS REPLACES PRIOR EVIDENCE DATED:			
				•			

PROPERTY INFORMATION

ı	OC.	ATIO	N/DES	CRIP	TION

475 Redwood Street, 3088 5th Avenue, San Diego, CA 92103

Unit:

Borrower: ANY UNIT-OWNER OF RECORD AT TIME OF LOSS

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 EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

COVERAGE INFORMATION

COVERAGE/PERILS/FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
A) BUILDINGS, ASSOCIATION PERSONAL PROPERTY & BUSINESS INCOME	\$ 50,312,500	\$ 10,000
Affiliated FM ProVision Form (excluding Earthquake); Special Form; Replacement Cost;		
Agreed Amount. Including Boiler & Machinery; Sublimits: \$10,000,000 Flood (Flood		
Deductible: \$50,000); Building Ordinance at Full Policy limit; Terrorism Risk Insurance Act		
Included.		
Including Earthquake Sprinkler Leakage		\$25,000
This association policy extends coverage to only those owners' fixtures/building improvements that the CC&Rs or governing documents state the association must insure. See attached for HO6 policies.		
B) FIDELITY BOND (Includes Property Management Company)	\$ 4,000,000	\$ 10,000

REMARKS (Including Special Conditions)

438BFUNS attached to policy. 95 Residential condominium Units, 2 Commercial condominium Units,	nits
CANCELLATION	

SHOULD ANY OF THE ABOVE POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST

NAME AND ADDRESS	✓ MORTGAGEE ☐ ADDITIONAL INSURED ✓ LOSS PAYEE ☐			
ANY LENDER OF RECORD AT TIME OF LOSS	LOAN#			
	AUTHORIZED REPRESENTATIVE Southy Michigan			

ACORD 27 (2009/12)

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Re: HO-6 (Condominium Homeowners Policy form name)

This policy does NOT include HO-6 coverage. However, if the CC&Rs require the association, not the owners, to insure unit owners' fixtures/interior building improvements inside their apartments, the association policy will cover them but only to the extent required in the CC&Rs.

Each owner should purchase an HO6 Condominium Homeowners Policy to insure their fixtures, personal property, loss of use/additional living expense/rent loss, loss assessment and most importantly personal liability.

DATE (MM/DD/YYY)

10/1/2017

CERTIFICATE OF LIABILITY INSURANCE

ACORD®

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 certificate holder in lieu of such endorsement(s)

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PRODUCER						
HUB International Insurance Services Inc	PHONE (A/C, No. Ext.)	415-276-2811 FAX (a/C, No.):				
580 California Street, Ste 1300	E-MAIL ADDRESS:	sfcerts@hubinternational.	certs@hubinternational.com			
San Francisco, CA 94104	PRODUCER CUSTOMER ID#:	PRODUCER CUSTOMER ID#:				
CA DOI License# 0757776		INSURER(S) AFFORDING COV	/ERAGE	NAIC #		
INSURED	INSURER A:	Travelers Property Casual	ty Co of America			
Alicante Owners Association	INSURER B:	Federal Insurance Company				
c/o Action Property Management	INSURER C:	Liberty Insurance Underw	riters, Inc.			
2603 Main Street, Suite 500	INSURER D:	Travelers Indemnity Comp	oany of			
Irvine, CA 92614-4261		Connecticut				
1141110, 071 02011 1201	INSURER E:					

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,

	USIONS AND CON	DITIONS OF SUCH POLIC		_	SHOWN MAY HAVE BEEN REDUCE				
INSR LTR				SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYY)	POLICY EXP (MM/DD/YYYY	LIMITS	
	GENERAL LIABILITY							EACH OCCURRENCE	\$ 1,000,000
Α	X COMMERCI	AL GENERAL LIABILITY			660-8471L313	10/1/2017	10/1/2018	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
	CLAIM	S-MADE X OCCUR						MED EXP (Any one person)	\$ 5,000
								PERSONAL & ADV INJURY	\$ 1,000,000
								GENERAL AGGREGATE	\$ 2,000,000
	GEN'L AGGREGA	TE LIMIT APPLIES PER:						PRODUCTS-COMP OP AGG	\$ 2,000,000
	POLICY	PRO- JECT X LOC							\$
	AUTOMOBILE LIAI	BILITY						COMBINED SINGLE LIMIT (Ea Accident)	\$ 1,000,000
D	ANY AUTO				BA-2G529627	10/1/2017	10/1/2018	BODILY INJURY (Per Person)	\$
	ALL OWNED AUTOS	SCHEDULED AUTOS						BODILY INJURY (Per Accident)	\$
	X HIRED AUTOS	X NON-OWNED AUTOS						PROPERTY DAMAGE (Per Accident)	\$
	X GARAGEKEEPERS LEGAL LIABILITY							Limit of Liability	\$ 500,000
	X UMBRELLA L	IAB X OCCUR						EACH OCCURRENCE	\$ 50,000,000
В	EXCESS LIAB	EXCESS LIAB CLAIMS-MADE			79879742	10/1/2017	10/1/2018	AGGREGATE	\$ 50,000,000
	DED	RETENTION \$							\$
	WORKERS' COMPEN AND EMPLOYERS' L							WC STATU- ORY LIMITS OTH- ER	\$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?							E.L. EACH ACCIDENT	\$
	(Mandatory in NH) If, yes, describe under							E.L. DISEASE – EA EMPLOYEE	\$
	DESCRIPTION OF (E.L. DISEASE - POLICY LIMIT	\$
С	Directors and	Officers Liability			CAP015973-0513	10/1/2017	10/1/2018	Ea.Occ/Ann Aggregate Deductible	\$ 1,000,000 \$ 1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required.

Homeowners Association located at 475 Redwood Street, 312 5th Avenue, San Diego, CA 92103

CERTIFICATE HOLDER	CANCELLATION

ANY LENDER OF RECORD AT TIME OF LOSS

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 REPRSENTATIVE

Dogethy Milahindals Dorothy McCorkindale

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