



CERTIFICATE OF LIABILITY INSURANCE

OP ID: HG

DATE (MM/DD/YYYY)

04/04/11

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).

PRODUCER Armstrong/Robitaille/Riegle (Formerly Robco Insurance Svc) 31501 Rancho Viejo Rd #103 San Juan Capistrano, CA 92675		949-487-6131 949-487-6151	CONTACT NAME: Ken Zimmerman PHONE (A/C, No, Ext): 951-270-3700 FAX (A/C, No): 951-270-3709 E-MAIL ADDRESS: kz@socalenterprise.com PRODUCER CUSTOMER ID #: REDHI-2
INSURED Red Hill Green Owners Association So Cal Enterprises, Inc. 1760 California Ave., #101 Corona, CA 92881		INSURER(S) AFFORDING COVERAGE INSURER A : Sequoia Insurance Company INSURER B : St. Paul Fire & Marine Ins Co INSURER C : INSURER D : INSURER E : INSURER F :	
		NAIC #	

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 LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY		SEP203360-01	04/10/11	04/10/12	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person) \$ 5,000
						PERSONAL & ADV INJURY \$ 1,000,000
						GENERAL AGGREGATE \$ 2,000,000
						PRODUCTS - COM/OP AGG \$ 2,000,000
						\$
A	AUTOMOBILE LIABILITY		SEP203360-01	04/10/11	04/10/12	COMBINED SINGLE LIMIT (Ea accident) \$ INCLUDED
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS					BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS					PROPERTY DAMAGE (Per accident) \$
	<input checked="" type="checkbox"/> NON-OWNED AUTOS					\$
		\$				
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR		QK065023045-23591	04/10/11	04/10/12	EACH OCCURRENCE \$ 5,000,000
	<input type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> CLAIMS-MADE					AGGREGATE \$ 5,000,000
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input checked="" type="checkbox"/> RETENTION \$ 10,000					\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		SEP203360-01	04/10/11	04/10/12	WC STATUTORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A				OTHER
	If yes, describe under DESCRIPTION OF OPERATIONS below					E. L. EACH ACCIDENT \$
						E. L. DISEASE - EA EMPLOYEE \$
			E. L. DISEASE - POLICY LIMIT \$			
A	PROP/BLKBLDG/SF/RC		SEP203360-01	04/10/11	04/10/12	DED-\$5000 14,145,600
A	FIDELITY BOND-CRME		SEP203360-01	04/10/11	04/10/12	DED-\$1000 250,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 (*) EXCEPT 10-DAY NOTICE OF CANCELLATION FOR NON-PAYMENT OF PREMIUM.

So Cal Enterprises, Inc. is an additional insured on the Association's liability, bond and umbrella.

CERTIFICATE HOLDER**CANCELLATION**

EVIDENCE OF COVERAGE
 So Cal Enterprises, Inc.
 1760 California Ave., #101
 Corona, CA 92881

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
 Jon Crain

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NOTEPAD

INSURED'S NAME Red Hill Green

REDHI-2
OP ID: HG

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ADDITIONAL COVERAGES

COMPANY: SEQUOIA INSURANCE COMPANY POLICY #: SEP203360-01
EFFECTIVE: 04/10/11 - 04/10/12

- *SEWER BACK-UP: 250,000 Limit/\$500 Deductible
- *ORDINANCE & LAW (CODE UPGRADE): \$500,000 Limit
- *MECHANICAL EQUIPMENT BREAK-DOWN: INCLUDED

RED HILL GREEN OWNERS ASSOCIATION

Master Policy: Our firm currently handles the Master Property Policy for your Association covering all of the "Real Property" subject to a \$5,000 deductible. Real property means the buildings. Finished surfaces may or may not be covered. Your CC&R's govern what coverage you have for finished surfaces. Finished surfaces are: wall-to-wall carpets, built-in cabinets, appliances, wallpaper, paint, etc.

A deductible is the portion of the loss you may be required to pay. An example of where the deductible may be yours to pay is: If your ice maker leaks and causes a loss that is below the deductible on the policy, you may be responsible for the entire loss. If a loss occurs in your unit due to something which you are responsible to maintain, then the deductible may be your responsibility.

Personal Insurance: Because your personal property and liability are NOT covered under the Association Master Policy, we recommend that every condo owner purchase their own Condo Owners/ H06 insurance policy. This policy is designed to cover

- * Personal Property (your clothing, furniture, TV, etc)
- * Personal Liability
- * Additional Living Expense (if you unit becomes uninhabitable due to an insured loss)

We also recommend including several other coverages such as:

- * Condo Building Coverage to cover upgraded carpeting, wooden flooring, window coverings, built-in cabinets or bookcases, finished surfaces, wall or ceilings. This coverage is important to consider as you may be responsible for interior losses or damages. The deductible is usually much lower than the deductible on the Association Master Policy. This may be required by your lender.

- * Loss Assessment- covers your share of assessments that may be charged against you by the Association for property or liability losses

- * Earthquake Loss Assessment- covers your share of assessments charged against you by the Association for earthquake damages.

How To Contact Us

If you have any questions regarding this coverage, you or your personal insurance agent are invited to call us. We do hope to be of service to you this coming year and assist you in any way we can...especially in coordinating our insurance with any of your personal insurance needs.

Armstrong/Robitaille/Riegle Business & Insurance Solutions
31501 Rancho Viejo Road, Suite #103
San Juan Capistrano, California 92675
License # 0795135

STAFF DIRECTORY

Corporate Office.....PH # 949-487-6131
FX # 949-487-6151

Association Insurance Information

Glenn Robinson.....Ext. 212
Joanne House.....Ext. 215
Debbie Martin.....Ext. 217
Carol Meldrum.....Ext. 207
Hector Guerrero.....Ext. 219
Matthew McMullin.....Ext. 215

Claims Department-Greg BowserExt. 202

New Business-Jon Crain.....Ext. 226

Insurance Verification949-240-7130

- * Loss Assessment covering your share of assessments charged against you by the Association for property or liability losses.

- * Earthquake loss assessment covering your share of assessments charged against you by the Association for earthquake damages.

Important Lender Information: As we do not always have your current lender information, we may not be able to mail a proper certificate of insurance directly to your lender. Many of you have already received correspondence from your lender asking for insurance information, and threatening you to force place the insurance and bill you. In order to take care of your lender's requirements in the most efficient and expedient way, please do the following:

- * Send us the letter from your lender, writing the name of your association at the top of the letter,

- * Please contact EOI DIRECT at (877) 456-3643 or you can fax the letter to us at 949-240-7514.

This is important because the lenders will not accept an incomplete document from us without all of the proper coding. We thank you for your help in this matter.

Earthquake Information

In addition, your Association *does not* have a blanket earthquake policy with our agency. Please contact us so that we can provide you with a quote from one of our competitive carriers.