



# CERTIFICATE OF LIABILITY INSURANCE

PARKV04

OP ID: TD

DATE (MM/DD/YYYY)  
06/11/2019

<b>PRODUCER</b> Segal Insurance Agency, Inc. CA License 0E24660 15250 Ventura Blvd., Ste 1200 Sherman Oaks, CA 91403 Steven G. Segal		Phone: 800-345-8866	<b>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 BELOW.</b>
<b>INSURED</b> Parkview Villas HOA So Cal Property Enterprises 1855 Sampson Avenue Corona, CA 92879		<b>INSURERS AFFORDING COVERAGE</b>	<b>NAIC #</b> 21652
		INSURER A: <b>Farmers Insurance</b>	
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	

## COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
A	X	GENERAL LIABILITY	60670 50 27	07/13/2019	07/13/2020	EACH OCCURRENCE \$ <b>1,000,000</b>	
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> DIRECTORS AND OFFICERS OCCUR <input checked="" type="checkbox"/>				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>75,000</b> MED EXP (Any one person) \$ <b>5,000</b> PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>2,000,000</b> PRODUCTS - COMP/OP AGG \$ <b>1,000,000</b> <b>D&amp;O LIAB</b> \$ <b>1,000,000</b>	
A		AUTOMOBILE LIABILITY	60670 50 27	07/13/2019	07/13/2020	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b>	
		<input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS				BODILY INJURY (PER PERSON) \$ BODILY INJURY (PER ACCIDENT) \$	
		GARAGE LIABILITY				<input type="checkbox"/> ANY AUTO	AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
A	X	EXCESS / UMBRELLA LIABILITY	60670 59 97	07/13/2019	07/13/2020	EACH OCCURRENCE \$ <b>2,000,000</b> AGGREGATE \$ <b>2,000,000</b> \$ \$ \$	
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	A0949 61 17	07/13/2019	07/13/2020	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ <b>1,000,000</b> E.L. DISEASE - EA EMPLOYEE \$ <b>1,000,000</b> E.L. DISEASE - POLICY LIMIT \$ <b>1,000,000</b>	
A		OTHER	60670 50 27	07/13/2019	07/13/2020	10K DED <b>16,827,600</b>	
A		FIDELITY BOND	60670 50 27	07/13/2019	07/13/2020	<b>500,000</b>	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

PROPERTY LOCATION: 613 PARKVIEW DR., LAKE ELSINORE, CA 92530  
 WALLS IN IMP & BET, 87 UNITS, SEVERABILITY CLAUSE INCLUDED, EXT REP COST,  
 MGMT CO ADDITIONAL INSURED

## CERTIFICATE HOLDER

## CANCELLATION

	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <b>30</b> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
	AUTHORIZED REPRESENTATIVE <b>Steven G. Segal</b>