



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/11/2021

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.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement.

Table with 2 main columns: PRODUCER (LaBarre/Oksnee Insurance) and CONTACT INFORMATION (phone, fax, email). Includes a sub-table for INSURER(S) AFFORDING COVERAGE with columns for INSURER NAME and 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.

Main table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Umbrella Liability, Workers Compensation, and Property/Fidelity Bond.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) HOA consists of 134 Units. Located in San Jacinto, CA 92583. Management Company is Additionally Insured on the General Liability, D&O Liability, and Fidelity Bond. See 2nd page of certificate of insurance for further coverage information.

CERTIFICATE HOLDER

CANCELLATION

Table with 2 columns: CERTIFICATE HOLDER (So Cal Property Enterprises, Inc.) and CANCELLATION (Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions. Includes signature of authorized representative).

**ADDITIONAL REMARKS SCHEDULE**

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|---|-----------------------------|--|--|
| AGENCY LaBarre/Oksnee Insurance | | NAMED INSURED Sunrise at Parkhill, Inc. c/o So Cal Property Enterprise 1855 Sampson Ave Corona, CA 92879 | |
| POLICY NUMBER SEE PAGE 1 | | | |
| CARRIER SEE PAGE 1 | NAIC CODE SEE P 1 | EFFECTIVE DATE: SEE PAGE 1 | |

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Certificate Remarks

Coverage is for **COMMON AREAS ONLY**.

Coverage Includes:

**Special Form with 100% Replacement Cost
Additional Property Limit of \$25,000 for Trees/Shrubs
Wind/Hail
Building Ordinance or Law A+B+C
Severability of Interest / Separation of Insureds
Computer Fraud & Funds Transfer Fraud
No Co-Insurance
Hired/Non-Owned Auto Included**

D&O Liability:

**Carrier: Philadelphia Insurance Company
Policy # PCAP006246-0418
Policy Term: 05/13/2021 – 05/13/2022
Limit: \$1,000,000
Deductible: \$1,000
D&O IS A IS CLAIMS-MADE POLICY**