



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/04/2021

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. 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 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. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Prendville Insurance Agency 24661 Del Prado, Suite 3 License #0740433 Dana Point CA 92629	CONTACT NAME: PHONE (A/C, No, Ext): (949) 487-9696 FAX (A/C, No): (949) 487-9626	
	E-MAIL ADDRESS:	
INSURED Villa La Verne Homeowners Association c/o SoCal Property Enterprises, Inc. 1855 Sampson Avenue Corona CA 92879	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Farmers Insurance Exchange	NAIC # 21652
	INSURER B: Great American Alliance Insura	26832
	INSURER C: AmTrust North America	15954
	INSURER D:	
	INSURER E:	

COVERAGES

CERTIFICATE NUMBER: Cert ID 23995

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> *D&O is Claims Made <input checked="" type="checkbox"/> D&O Ded: \$1,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		60677-27-07	08/01/2021	08/01/2022	EACH OCCURRENCE \$ 3,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 75,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 3,000,000 GENERAL AGGREGATE \$ 6,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 D&O Liability* \$ 1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED <input type="checkbox"/> AUTOS ONLY HIRED <input checked="" type="checkbox"/> AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY	Y		60677-27-07	08/01/2021	08/01/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y		UM30210934	08/01/2021	08/01/2022	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	TCW4000105	08/01/2021	08/01/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
AB	Fidelity Bond	Y		60677-27-07	08/01/2021	08/01/2022	Fidelity Bond Deductible \$500 \$ 3,200,000
A	Property (R/C)			60677-27-07	08/01/2021	08/01/2022	Property Deductible \$25,000 \$ 61,645,788

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

(B) Excess Fidelity Bond \$1,200,000, \$10,000 Deductible.

Policy #SSA-392-56-74-09913-02 Effective 08/01/2021-08/01/2022

SoCal Property Enterprise, Inc. is Named as Additional Insured as Respect to Auto Liability,

CGL, D&O Liability, Fidelity Bond and Umbrella Liability.

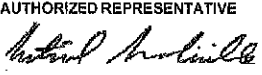
Walls-In Coverage Applies. 300 Units, 75 Buildings. 125% Extended Replacement Cost.

Wind & Hail Included. Building Ordinance Coverage:

A(Undamaged)=Included; B(Demolition)=\$4,087,500; C(Increased Construction Cost)=\$6,127,500.

*CANCELLATION: 30 DAY NOTICE, EXCEPT 10 DAY NOTICE FOR NON-PAYMENT OF PREMIUM.

CERTIFICATE HOLDER**CANCELLATION**

SoCal Property Enterprise, Inc. 1855 Sampson Avenue Corona CA 92879	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 
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INSURANCE INFORMATION FOR VILLA LA VERNE HOMEOWNERS ASSOCIATION

This two-sided information fact sheet will help unit owners in understanding:

1. The association's master insurance policy.
2. The unit owner's individual insurance needs.
3. How to obtain a certificate of insurance.
4. How to file a claim.

THE ASSOCIATION'S MASTER POLICY

Property Covered:

Common areas; the structure; standard light, bathroom, and kitchen fixtures; standard kitchen cabinetry and countertops; standard permanently installed appliances; standard floor coverings, ceiling coverings and wall coverings (eg: paint and carpeting) located in any residential unit.

Property Not Covered:

A unit owner's personal effects and any improvements and upgrades that are a part of the building or structure.

Covered causes of Loss (Damage):

Fire; lightning; windstorm; hail; explosion; riot; damage caused by aircraft or vehicle; smoke; vandalism; falling objects; weight of ice, snow or sleet; collapse; sudden and accidental discharge or leakage of water as a direct result of the breaking apart or cracking of any part of a system or appliance containing water or steam.

Non-Covered causes of Loss (Damage):

Wear and tear; rust, corrosion, fungus, decay, deterioration, hidden or latent defect or any quality in property that causes it to damage or destroy itself; smog; damage by insects or animals; settling, cracking, shrinking or expansion; repeated leaking or seeping of water (including around the shower, bathtub, toilet or sink); poor maintenance; faulty construction; earth movement; volcanic eruption, explosion or effusion; water, in any form (except sudden and accidental discharge or leakage of water as mentioned above); mudslide or mudflow; asbestos; negligent work.

Deductible:

\$ 25,000 per occurrence – Note: The individual unit owner may be responsible for this deductible.
Please see the Loss Assessment section on the next page.

UNIT OWNER'S INSURANCE NEEDS

Personal Property coverage, with replacement cost, covering personal belongings as the master association policy does not cover a unit owner's personal property.

Building Additions and Alterations need to be covered on a unit owner's personal policy. Such items include all additions and alterations made to the original structure. Should a unit have upgraded bathroom, kitchen and light fixtures; upgraded kitchen cabinetry and countertops; upgraded permanently installed appliances; and/or upgraded floor coverings, ceiling coverings and wall coverings, the unit owner needs to insure for the additional cost of these upgrades.

Loss of Use will pay the unit owner's additional living expense while the unit is unfit to live in due to a covered loss. If a condo is rented out, this coverage will be replaced with Loss of Rents coverage.

Loss Assessment will pay the unit owner's share of a special assessment levied by the Association due to an insured loss exceeding the association's master policy limits.

Important – In the recent past, unit owners have been exposed to Association deductibles in certain circumstances. With proper building and Loss Assessment coverage, unit owners can obtain coverage for their portion of the Association's deductible.

YOUR ASSOCIATION'S deductible is \$ 25,000.

Personal Liability pays for bodily injuries to other people or damage to their property if the unit owner is liable resulting from unintentional acts committed by family members including sporting activities and acts of pets.

CEA Earthquake:

Building Property (Interior Structural Coverage): \$25,000-\$100,000 with 5%-25% deductible options.

Personal Property: \$5,000 - \$200,000 coverage with 5%-25% deductible options.

Loss of Use: \$1,500 - \$100,000 for additional living expenses.

Earthquake Loss Assessment Coverage: This coverage will pay for your share of earthquake damage to the association Units when you are assessed because the association either had no coverage or they need to meet their deductible. \$25,000 - \$100,000 with 5%-25% deductible options.

Unit owner's coverage may be obtained by calling

Cindy Laing at your association's insurance agency, Prendiville Insurance Agency at (800) 482-4467.

HOW TO OBTAIN A CERTIFICATE OF INSURANCE

Certificates of Insurance (available to financial institutions for loan purposes) may be obtained by visiting www.EOIDirect.com or contacting their help desk at (877) 456-3643.

HOW TO FILE A CLAIM

If you have a claim, notify your association's management company (or designated board member) and your own homeowner's insurance carrier. Claims payments under this policy are made to your board of directors as insurance trustee.

The above information is provided to assist in understanding the basic coverage on the Association's and Unit Owner's policies. For final coverage determination, both policies should be reviewed.

Prendiville Insurance Agency 800-482-4467