



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

4/29/2024

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.

AGENCY The Firebird Agency 1333 Greenfield Road, Suite 103 Mesa AZ 85205		PHONE (A/C, No, Ext): (480) 808-5521	COMPANY BERKLEY NATL INS CO	
FAX (A/C, No):	E-MAIL ADDRESS: serviceteam@FBagency.net			
CODE:	SUB CODE:			
AGENCY CUSTOMER ID #:		LOAN NUMBER		
INSURED Harrison Estates Homeowners Association, Inc . c/o Bidegain Realty Inc, 8755 E Broadway Blvd tucson AZ 85710		POLICY NUMBER QDP4AL0001598-10		
		EFFECTIVE DATE 04/10/2024	EXPIRATION DATE 04/10/2025	
		<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED		
THIS REPLACES PRIOR EVIDENCE DATED:				

PROPERTY INFORMATION

LOCATION/DESCRIPTION c/o Bidegain Realty Inc, tucson LOC: 1 - c/o Bidegain Realty Inc, 8755 E Broadway Blvd tucson AZ 85710			8755 E Broadway Blvd AZ 85710
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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 DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

COVERAGE INFORMATION	PERILS INSURED	BASIC	BROAD	SPECIAL			AMOUNT OF INSURANCE		DEDUCTIBLE
							COVERAGE / PERILS / FORMS		
Blanket Building (Replacement Cost)							6,390,120		10,000
Blanket Business Personal Property							137,763		
Blanket Business Income							98,363		
Equipment Breakdown							6,390,120		

REMARKS (Including Special Conditions)

See ACORD 101

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.

ADDITIONAL INTEREST

NAME AND ADDRESS Bidegain Realty Inc. 8755 E. Broadway Blvd. Tucson AZ 85710	<input type="checkbox"/> ADDITIONAL INSURED	<input type="checkbox"/> LENDER'S LOSS PAYABLE	<input type="checkbox"/> LOSS PAYEE
	<input type="checkbox"/> MORTGAGEE	LOAN #	
	AUTHORIZED REPRESENTATIVE <i>Travis Sibley</i>		



ADDITIONAL REMARKS SCHEDULE

AGENCY The Firebird Agency		NAMED INSURED Harrison Estates Homeowners Association, Inc.	
POLICY NUMBER QDP4AL0001598-10			
CARRIER BERKLEY NATL INS CO	NAIC CODE 38911	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 27 **FORM TITLE:** Evidence of Property Insurance

Insuring Agreement: Original Specification/Single Entity: Walls-In coverage, excluding improvements, betterments, upgrades and additional installations to the unit, after first conveyance.

34 Units 7 Buildings

- (1-4) 9350 E. Speedway Boulevard Tucson AZ 85710
- (5-8) 9350 E. Speedway Boulevard Tucson AZ 85710
- (9-13) 9350 E. Speedway Boulevard Tucson AZ 85710
- (14-20) 9350 E. Speedway Boulevard Tucson AZ 85710
- (21-26) 9350 E. Speedway Boulevard Tucson AZ 85710
- (27-28) 9350 E. Speedway Boulevard Tucson AZ 85710
- (29-34) 9350 E. Speedway Boulevard Tucson AZ 85710



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/6/2024

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 The Firebird Agency 1333 Greenfield Road, Suite 103 Mesa AZ 85205	CONTACT NAME: PHONE (A/C, No, Ext): (480) 808-5521 FAX (A/C, No): E-MAIL ADDRESS: serviceteam@FBagency.net	
	INSURER(S) AFFORDING COVERAGE	
INSURED Harrison Estates Homeowners Association, Inc. c/o Bidegain Realty Inc, 8755 E Broadway Blvd Tucson AZ 85710	INSURER A : ACE FIRE UNDERWRITERS INS CO NAIC # 20702	
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE	\$
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
							MED EXP (Any one person)	\$
							PERSONAL & ADV INJURY	\$
							GENERAL AGGREGATE	\$
							PRODUCTS - COMP/OP AGG	\$
								\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE OTH-ER	
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
A	Crime			ADOAZF166222422-003	04/10/2024	04/10/2025	Employee Theft	150,000
							Theft	25,000
							ROBOT	25,000

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

CERTIFICATE HOLDER Bidegain Realty Inc. 8755 E. Broadway Blvd. Tucson AZ 85710	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.
	AUTHORIZED REPRESENTATIVE Travis Sibley

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PRODUCER The Firebird Agency 1333 Greenfield Road, Suite 103 Mesa AZ 85205	CONTACT NAME: _____ PHONE (A/C, No, Ext): (480) 808-5521 E-MAIL ADDRESS: serviceteam@FBagency.net FAX (A/C, No): _____
	INSURER(S) AFFORDING COVERAGE INSURER A: BERKLEY NATL INS CO NAIC # 38911 INSURER B: FEDERAL INS CO 20281 INSURER C: ACE FIRE UNDERWRITERS INS CO 20702 INSURER D: _____ INSURER E: _____ INSURER F: _____
INSURED Harrison Estates Homeowners Association, Inc. c/o Bidegain Realty Inc, 8755 E Broadway Blvd Tucson AZ 85710	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

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A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: _____			QDP4AL0001598-10	04/10/2024	04/10/2025	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			QDP4AL0001598-10	04/10/2024	04/10/2025	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED: _____ RETENTION \$: _____			G74715217	04/10/2024	04/10/2025	EACH OCCURRENCE	\$ 5,000,000
							AGGREGATE	\$ 5,000,000
								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE	OTH-ER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
C	Directors and Officers			ADOAZF166222422-003	04/10/2024	04/10/2025	DO	000,000 / 1,000,000

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

CERTIFICATE HOLDER**CANCELLATION**

Bidegain Realty Inc. 8755 E. Broadway Blvd. Tucson AZ 85710	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 <i>Travis Sibley</i>
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