

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/10/2024

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 endorsements.

	' SUBROGATION IS WAIVED, Subject is certificate does not confer rights t				uch en	dorsement(s		require an endors	ement.	. A St	atement on
	DUCER	CONTACT NAME:									
	Barre/Oksnee Insurance Enterprise, Suite 180	PHONE (A/C, No, Ext): 800-698-0711 FAX (A/C, No): 949-588-1275									
	so Viejo CA 92656	E-MAIL ADDRESS: proof@hoa-insurance.com									
	•				INSURER(S) AFFORDING COVERAGE						NAIC#
				DESEPAL-05	INSURER A: American Alternative Ins Co.						19720
	_{JRED} sert Palms Townhouse Association	INSURER B:									
	O Bidegain Realty	INSURER C:									
8755 E. Broadway Boulevard						INSURER D:					
Tu	cson AZ 85710	INSURER E :						<u> </u>			
		INSURER F:									
				NUMBER: 741313313	REVISION NUMBER: VE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD						
C E	IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	EQUIF PERT POLI	REMEI AIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF AN' ED BY	Y CONTRACT THE POLICIES REDUCED BY F	OR OTHER I	DOCUMENT WITH F D HEREIN IS SUBJ	RESPEC	CT TO \	WHICH THIS
INSR	7	Mad Mad		POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)) LIMITS		<u>s</u>	
A X COMMERCIAL GENERAL LIABILITY Y CLAIMS-MADE X OCCUR				CAU510518-5		6/11/2024	6/11/2025	EACH OCCURRENCE \$2,000 DAMAGE TO RENTED PREMISES (Fa occurrence) \$1,000			
								PREMISES (Ea occurrence) \$1,0 MED EXP (Any one person) \$5,0			
								PERSONAL & ADV INJ		\$2,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:		}					GENERAL AGGREGATE \$ Unlin			
	X POLICY PRO-							PRODUCTS - COMP/O	UCTS - COMP/OP AGG \$ 2,000,000 \$,000
A	OTHER: A AUTOMOBILE LIABILITY			CAU510518-5		6/11/2024	6/11/2025	COMBINED SINGLE LIMIT \$2,000,0		,000	
	ANY AUTO							BODILY INJURY (Per person) \$			
	OWNED AUTOS ONLY X HIRED AUTOS ONLY X AUTOS ONLY AUTOS ONLY AUTOS ONLY							BODILY INJURY (Per accident) \$		\$	
								PROPERTY DAMAGE (Per accident) \$		\$	
								· · · · · · · · · · · · · · · · · · ·		\$	MANAGEMENT
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE		\$	
	EXCESS LIAB CLAIMS-MADE			1				AGGREGATE		\$	
	DED RETENTION \$ WORKERS COMPENSATION							DEB		\$	
	AND EMPLOYERS' LIABILITY								OTH- ER		
ANYPROPRIETOR/PARTNER/EXECUTIVE N/A		ı				E.L. EACH ACCIDENT		\$			
	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE \$			
Α	Property			CAU510518-5		6/11/2024	6/11/2025	E.L. DISEASE - PÓLICY \$2,500 Deductible	LIMIT	\$9,896	6 250
A A	CAUS-10518-5 Crime/Fidelity Pirectors & Officers Y CAUS-10518-5 CAUS-10518-5				6/11/2024 6/11/2024 6/11/2024	6/11/2025	\$0 Deductible \$0 Deductible	\$150,0 \$2,000	000		
	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL A consists of 55 Units, Located in Tucso			101, Additional Remarks Schedul	e, may be	attached If more	space ls require	d)			
Mar	nagement Company is Additionally Insur	ed or	the i	General Liability, D&O Liab	oilitv. ar	nd Fidelity Bor	nd.				
	2nd page of certificate of insurance for			• •	- ,,						
See	Attached										
CER	RTIFICATE HOLDER	CANC	CANCELLATION								
Bidegain Realty, Inc. 8755 E. Broadway Blvd.						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					

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USA

Tucson AZ 85710

AUTHORIZED REPRESENTATIVE

GENCY	CUSTOMER	ID: DESEPAL-05
AGENCY	CUSTOMER	ID: DESERVE-03

LOC #:



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

	ism II & Essat VII A							
AGENCY LaBarre/Oksnee Insurance		NAMED INSURED Desert Palms Townhouse Association						
POLICY NUMBER		C/O Bidegain Realty 8755 E. Broadway Boulevard Tucson AZ 85710						
CARRIER	NAIC CODE							
ADDITIONAL REMARKS		EFFECTIVE DATE:						
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM NUMBER:25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE								
Single Entity Coverage (Walls In, excluding Improvements and Betterments)								
Coverage Includes: Special Form with Guaranteed Replacement Cost Wind/Hail Equipment Breakdown Building Ordinance or Law A+B+C Inflation Guard and/or limits are reviewed yearly to ensure 100% Replacement Cost Severability of Interest / Separation of Insureds Waiver of Rights of Recovery No Co-Insurance D&O is a Claims-Made Policy								
Equipment Breakdown Building Ordinance or Law A+B+C Inflation Guard and/or limits are reviewed yearly to ensure 100% Replacement Cost								
Waiver of Rights of Recovery No Co-Insurance DNO Co-Insurance No Co-Insurance								
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