

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 12/10/2024

IMPORTANT: If the cartificate holder is an ADDITIONAL INSURED, the policy(res) must have ADDITIONAL INSURED provisions or be endorsement. A statement on this cartificate does not conforrights to the cartificate holder in lieu of such endorsement(s).           Sol Does 2020           Sol Does 20200           Sol Does 20200     <	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.											
Produces P O Box 2239 Sent/West Insurance I Liensel 1500 Insurance A .cool@cent/west.com Insurance .col@cent/west.com Insurance .col@cent/west.col@cent/west.col@cent/west.col@cent/west.col@cent/west.col@cent/west.col@cent/west.col@cent	IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed.											
Po O, Box 2980 Salt Lake City UT 84109     Identified Insurance     Identified     Ide												
P. O. Stor 3293       Salt Lake City UT 94109       Ide: bb: 01-27/-3913       Ide: bb: 01-27/-3913         Network       Name					NAME:							
Saft Lake City UT 84109 Leased: 140 Leased						PHONE (A/C, No						
Leonati 199     Leonati 1												
Leongef: 1540     Hausen al. Accelerant National Insurance     10220     VULVMM     Housen al. Contentional Costandor Company     20443     masker al. Contentional Costandor Company     27138     Marker al. Midvale Indemnity Company     27138     More to al.     M						712 2112						
NUMERD         VULNOSO         NUMERD         VULNOSO           VIIIGRE Homeowners Association c/o M & Management 3783 South 500 West Ste. 8 South Sait Lake UT 94115         Numere I: Musere II: Musere I: Musere II: Musere I: Musere I: Musere II: Musere I					1:							
Village Homeowners Association       markets i: Counting Usage (Counting Usage (Counti	INSURF	D										
17783 South High Wine Bit Bit South Sait Lake UT 84115       Image E :												
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LTR     TYPE OF NBURANCE     INSD IVVD     POLICY NUMBER     IMMDDBYYYN     IMMDDBYYYN     ILMITS       A     X     COMMERCIA GENERAL MABUITY     N030PK2295-01     12/8/2024     12/8/2024     12/8/2024     50.00       GRUN AGREGATE LIMIT APPLIES PER:     POLICY     POLICY     FEB.000.000     FEB.000.000       GRUN AGREGATE LIMIT APPLIES PER:     POLICY     Store     50.00       GRUN AGREGATE LIMIT APPLIES PER:     N030PK2295-01     12/8/2024     12/8/2024     12/8/2025       A     ATOTOMOBILE LIABILITY     N030PK2295-01     12/8/2024     12/8/2025     50.00       ANTONO SILE LUBILITY     N030PK2295-01     12/8/2024     12/8/2025     50.00       ANTONO SILE LUBILITY     SOHEDULED     SOHEDULED     SOHEDULED     SOHEDULED       ANTOS ONLY     XATTOS ONLY     ANTOS ONLY     ANTOS ONLY     SOHEDULED       ANTOS ONLY     XATTOS ONLY     XATTOS ONLY     ANTOS ONLY     SOHEDULED       ANTOS ONLY     SOHEDULED     SOHEDULED     SOHEDULY NURKY (PE present)	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,											
A       X       COMMERCIAL GENERAL LIABILITY       N030PK2285-01       12/8/2024       12/8/2025       EACH OCCUPRENCE       \$ 2.000.000         B       CLAMIS MADE       X       OCCUPRENCE       \$ 1.000.000       Image: Clamis Made       \$ 1.000.000         GENL AGGREGATE LIMIT APPLIES PER:       Image: Clamis Made       Image: Clamis Made       \$ 1.000.000       Image: Clamis Made       \$ 1.000.000         GENL AGGREGATE LIMIT APPLIES PER:       Image: Clamis Made       Image: Clamis Made       \$ 1.000.000       Image: Clamis Made       \$ 1.000.000         GENL AGGREGATE LIMIT APPLIES PER:       Image: Clamis Made       Image: Clamis Made       \$ 1.000.000       Image: Clamis Made       \$ 1.000.000         A       Autronobilitie Limit 1       Image: Clamis Made       Image: Clamis Made       \$ 0.000.1110/UKP (Per protein)       \$ 0.000.110/UKP (Per protein)       \$ 0.000.111	INSR I TR	TYPE OF INSURANCE			POLICY NUMBER		POLICY EFF (MM/DD/YYYY)		LIMIT	s		
CLAMS-MADE       X OCCUR         CLAMS-MADE       X OCCUR         CLAMS-MADE       X OCCUR         CENL AGGREGATE LIMIT APPLIES PER:       Stood         POLICY       JEEC         LIC       JEEC         COTHER:       N030PK2295-01         A AUTOMOBILE LIABILITY       N030PK2295-01         AVITOR ONLY       XICTO ONLY         AVITOR		COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$ 2,000	,000	
Image: Second									DAMAGE TO RENTED	<b>+</b> ,	,	
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GENL AGGREGATE     BUT APPLIES PER:     DOC       POLICY     DECT     LOC       OTHER:     N030PK2295-01     12/8/2024       A ATTOMOBLE LABILITY     N030PK2295-01     12/8/2024       DOWRD     STEDULD       DEDU     RETEXTON S       WORKERS COMPENSATIONS     StoDONO       ADEDUMERTY     N/A       DEDUMERTY     N/A       ADEDUMERTY     N/A       DEDUMERTY     N/A       DEDUMERTY     StoDONO       ADEDUMERTY     N/A       DEDUMERTY     StoDONO       ADEDUMERTY     N/A       DEDUM												
POLICY FED     P												
Image: Contract of the contract	G											
A AUTOMOSSIE LIABILITY       N030PK2295-01       12/8/2024       12/8/2025       COMBINED SINCLE LIMIT BODILY INUURY (Per person)       \$         ANY AUTO OVER SOLV       SCHEDULED AUTOS ONLY		POLICY JÉČT LOC							PRODUCTS - COMP/OP AGG		,000	
A vy Auto       Isource									COMBINED SINGLE LIMIT	•	000	
AVMED       AVTOS ONLY       BODIL YINJURY (Per accident)       \$         C       A       MUBRELLA LIAB       CLAIMS-MADE       PRP-229824000-01-2587228       12/8/2024       12/8/2024       EACH OCCURRENCE       \$,5,000,000         DED       RETENTION \$       CLAIMS-MADE       ACCR CLAIMS-MADE       ACCR CLAIMS-MADE       S,000,000       ACGREGATE       \$,5,000,000         WORKERS COURTED AVAITMENE RECUTIVE       Y/N       N/A       ACCR CLAIMS & S,000,000       ACGREGATE       \$,5,000,000       ACGREGATE <t< td=""><td>AA</td><td></td><td></td><td></td><td>N030PK2295-01</td><td colspan="2">12/8/2024</td><td>12/8/2025</td><td>(Ea accident)</td><td></td><td>,000</td></t<>	AA				N030PK2295-01	12/8/2024		12/8/2025	(Ea accident)		,000	
AUTOS ONLY     AUTOS       X     MURCH () # AUTOS       X     MURCH () # AUTOS       AUTOS ONLY     AUTOS       X     UMBRELLA LIAB       X     UMBRELLA       X     UMBRELLA       X     UMBRELLA       X     UMBRELLA <t< td=""><td></td><td></td><td></td><td></td><td></td><td rowspan="2"></td><td></td><td rowspan="2"></td><td> ,</td><td></td><td></td></t<>									,			
Image: Autros only intervent of a construction of the c		AUTOS ONLY AUTOS							· · · · · ·	) \$		
C       X       UMBRELLA LLB       X       OCCUR       PRP-229824000-01-2587228       12/8/2024       12/8/2025       EACH OCCURRENCE       \$ 5,000,000         A       DED       RETENTION S       CLAIMS-MADE       \$       \$       \$         WORKERS COMPENSATION AND EMPLOYERS' LUBBUTY       N/A       PER-229824000-01-2587228       12/8/2024       12/8/2025       EACH OCCURRENCE       \$ 5,000,000         MORKERS COMPENSATION AND EMPLOYERS' LUBBUTY       N/A       PER-229824000-01-2587228       12/8/2024       12/8/2025       EL       DESCRIPTION OF OPERATIONS below       768586899       12/8/2024       12/8/2025       52.000 Retention       22.000.000       41.750,000       10,000,000       41.750,000       10,000,000       41.750,000       10,000,000       41.750,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,000,000       10,	X	X AUTOS ONLY X AUTOS ONLY							(Per accident)	\$		
Excess Liab     Occont     Deb     RETENTION S     AGGREGATE     \$5,000,000       AMD EMPLOYRES LABULTY     Y/N     AGGREGATE     \$5,000,000       AMD EMPLOYRES LABULTY     Y/N     N/A     EL CONSCIPENTION       AMD EMPLOYRES LABULTY     Y/N     N/A     EL CONSCIPENTION       Decomposition     PER     S     PER       MANDEMPLOYRES LABULTY     Y/N     N/A     EL CONSCIPENTION       AMD EMPLOYRES LABULTY     Y/N     N/A     EL CONSCIPENTION       Manual Constraints     PER     S     PER       Manual Constraints     N/A     EL CONSCIPENTION     PER       Manual Constraints     PER     S     PER       Manual Constraints     PER     PER     PER       Manual Constraints     PER     PER     PER       Manual Constraints     PER     PER     PER       Manual Constrestore     PER										\$		
DED       RETENTIONS       BORNOWL	сх	UMBRELLA LIAB X OCCUR			PRP-229824000-01-2587228	3	12/8/2024	12/8/2025	EACH OCCURRENCE	\$ 5,000	,000	
WORKERS COMPENSATION         PR         DTH           AND EMPLOYERS LIBILITY         Y/N         N/A           ANYPROPRIETOR/ARTINER/EXECUTIVE         Y/N         N/A           DEFCORT/MAMMERE REACUTIVE         Y/N         N/A           DFECOR/MEMERE REACUDEDD?         N/A           B         Directors & Officers           B         Directors & Officers           B         Directors & Officers           B anket Building         2.000,000           ELL DISEASE - POLICY LIMIT         \$           CERTIFICO OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)           A. Employee Dishonesty \$200,000 71 Units           A LI IN-WALLS IN, GUARANTEED REPLACEMENT COST           Wind/Hail Coverage Included           Equipment Breakdown Included           Ordinance and Law Coverage A: Included in building limit, B: \$500,000, C: \$500,000           CertificAte HoldDer           *** Information Only **           *** Information Only **		EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$ 5,000	,000	
WORKERS COMPENSATION NADE DEPLOYERS LIBILITY ANYPROPRIETOR/ARTINER/EXECUTIVE OFFICE/RMEMERERCUODED? (Mandatory in NH) If ves. describe under DESCRIPTION OF OPERATIONS below         N/A         PIC         Statute         Image: Statute         Statute <thstatute< t<="" td=""><td></td><td>DED RETENTION \$</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>\$</td><td></td></thstatute<>		DED RETENTION \$								\$		
AVPERQUENT EXPLOSION OF OPERATIONS PROVIDE       Y/N         AVPERQUENT EXPLOSION OF OPERATIONS PROVIDE TO PROVIDE PROVIDE TO PROVIDE PROVIDE PROPRESENTATIVE.		ORKERS COMPENSATION							PER OTH- STATUTE FR			
OFFICERMEMBERERCLUDED?       N/A         If yes, describe under       EL_DISEASE - EA EMPLOYEE \$         DESCRIPTION OF OPERATIONS below       768586899         B       Directors & Officers         B       Battertors & Officers         B       Battertors & Officers         B       Directors & Officers         B       Battertors & Officers         B       Battertors & Officers         B       Discores & Officers         B       Difficers         B       Discores & Officers	I 1	T/N								\$		
In types, describe under       Intervention       Interventin <td>OF</td> <td>FICER/MEMBER EXCLUDED?</td> <td>N/A</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	OF	FICER/MEMBER EXCLUDED?	N/A									
B       Directors & Officers       2,000,000       44,750,000         Banket Building       2000,000       44,750,000       12/8/2024       12/8/2025       \$2,500 Retention       2,000,000         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)       A. Employee Dishonesty \$200,000 71 Units       ALL IN-WALLS IN, GUARANTEED REPLACEMENT COST         Wind/Hail Coverage Included       Equipment Breakdown Included       Ordinance and Law Coverage A: Included in building limit, B: \$500,000, C: \$500,000       C: \$500,000         CerrificATE HOLDER       CANCELLATION         Verificate Holder       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	lify	/es, describe under										
A       Blanket Building       N030PK2295-01       12/8/2024       12/8/2025       \$50,000 PER UNIT DED.       44,750,000         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)       44,750,000       10,000,000         A. Employee Dishonesty \$200,000 71 Units       ALTIN-WALLS IN, GUARANTEED REPLACEMENT COST       Wind/Hail Coverage Included       44,750,000         Wind/Hail Coverage A: Included in building limit, B: \$500,000, C: \$500,000       Crime coverage extends to Property Managers       Severability of Interests/Separation of Insured         See Attached       CANCELLATION       SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE         ** Information Only **       Authorized Representative       Authorized Representative					768586899		12/8/2024	12/8/2025			.000	
A. Employee Dishonesty \$200,000 71 Units ALL IN-WALLS IN, GUARANTEED REPLACEMENT COST Wind/Hail Coverage Included Equipment Breakdown Included Ordinance and Law Coverage A: Included in building limit, B: \$500,000, C: \$500,000 Crime coverage extends to Property Managers Severability of Interests/Separation of Insured See Attached CERTIFICATE HOLDER CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	A BI	anket Building							\$50,000 PER UNIT DED.			
Wind/Hail Coverage Included       Equipment Breakdown Included         Ordinance and Law Coverage A: Included in building limit, B: \$500,000, C: \$500,000       Crime coverage extends to Property Managers         Severability of Interests/Separation of Insured       See Attached         CERTIFICATE HOLDER         CANCELLATION         ** Information Only **         ** Information Only **	A. Em	A. Employee Dishonesty \$200,000 71 Units										
Equipment Breakdown Included         Ordinance and Law Coverage A: Included in building limit, B: \$500,000, C: \$500,000         Crime coverage extends to Property Managers         Severability of Interests/Separation of Insured         See Attached         CERTIFICATE HOLDER         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.         ** Information Only **	Mind/	Hail Coverage Included										
Ordinance and Law Coverage A: Included in building limit, B: \$500,000, C: \$500,000         Crime coverage extends to Property Managers         Severability of Interests/Separation of Insured         See Attached         CERTIFICATE HOLDER         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.         ** Information Only **	Equip	ment Breakdown Included										
Severability of Interests/Separation of Insured See Attached       CANCELLATION         CERTIFICATE HOLDER       CANCELLATION         ** Information Only **       SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.         ** Information Only **       AUTHORIZED REPRESENTATIVE	Ordina	ance and Law Coverage A: Included i	n buildi	ing li	imit, B: \$500,000, C: \$500	,000,						
See Attached       CANCELLATION         CERTIFICATE HOLDER       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.         ** Information Only **	Sever	coverage extends to Property Manage ability of Interests/Separation of Insur	jers ed									
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE         THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN         ACCORDANCE WITH THE POLICY PROVISIONS.         *** Information Only **												
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE         THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN         ACCORDANCE WITH THE POLICY PROVISIONS.         *** Information Only **	CERT	IFICATE HOLDER				CANO	CANCELLATION					
** Information Only **       AUTHORIZED REPRESENTATIVE												
AUTHORIZED REPRESENTATIVE							THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN					
	** Information Only **						AUTHORIZED REPRESENTATIVE					
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AGENCY CUSTOMER ID: VILLHOM-01

LOC #:

ACORD	

## **ADDITIONAL REMARKS SCHEDULE**

Page 1 of 1

AGENCY SentryWest Insurance POLICY NUMBER		NAMED INSURED Village Homeowners Association c/o M & M Management 3783 South 500 West Ste. 8 South Salt Lake UT 84115			
CARRIER	NAIC CODE				
		EFFECTIVE DATE:			

## ADDITIONAL REMARKS

## THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE 25 FORM NUMBER:

Policy is not pooled with any unaffiliated projects 30 Days Notice of Cancellation EXCEPT 10 Days for Non-Payment of Premium

As per Form S CP 12303 10 20 "Fixtures, improvements, betterments, installations and alterations within the interior surfaces of the walls, floors, and ceilings; and Appliances, such as those used for refrigerating, ventilation, cooking, dishwashing, laundering, security or housekeeping."