



CERTIFICATE OF PROPERTY INSURANCE

DATE(MM/DD/YYYY)
10/17/23

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.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

PRODUCER LAUREN MIRALLE INSURANCE AGCY INC PO Box 231214 Encinitas, CA 92024		CONTACT NAME: PHONE (A/C, No, Ext): (760)496-1686 FAX (A/C, No): (760)496-1684 E-MAIL ADDRESS: Susan@TheMiralleAgency.com PRODUCER CUSTOMER ID:	
INSURED GROSSMONT VILLAGE CONDO ASSOC c/o 360 Community Mgmt 10769 Woodside Ave #210 Santee, CA 92071 619-270-7360		INSURER(S) AFFORDING COVERAGE NAIC# INSURER A : FARMERS INSURANCE EXCHANGE INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
EARL STREET, AMAYA DRIVE, HOWELL DRIVE

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	POLICY NUMBER	POLICY EFFECTIVE DATE(MM/DD/YYYY)	POLICY EXPIRATION DATE(MM/DD/YYYY)	COVERED PROPERTY	LIMITS	
A	<input checked="" type="checkbox"/> PROPERTY	60176-57-66	10/15/2023	10/15/2024	BUILDING	\$ 35,501,500	
	CAUSES OF LOSS				DEDUCTIBLES	PERSONAL PROPERTY	\$
	<input type="checkbox"/> BASIC				BUILDING	BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD				10,000	EXTRA EXPENSE	\$
	<input checked="" type="checkbox"/> SPECIAL				CONTENTS	RENTAL VALUE	\$
	EARTHQUAKE					BLANKET BUILDING	\$
	WIND					BLANKET PERS PROP	\$
	FLOOD					BLANKET BLDG & PP	\$
A	<input type="checkbox"/> INLAND MARINE	TYPE OF POLICY	10/15/2023	10/15/2024		\$	
	CAUSES OF LOSS					\$	
A	<input type="checkbox"/> NAMED PERILS	POLICY NUMBER	10/15/2023	10/15/2024		\$	
	<input checked="" type="checkbox"/> UMBRELLA	601460617			<input checked="" type="checkbox"/> LIMIT	\$ 1,000,000	
A	<input type="checkbox"/> CRIME	60176-57-66	10/15/2023	10/15/2024		\$	
	TYPE OF POLICY					<input checked="" type="checkbox"/> LIMIT	\$ 800,000
A	<input checked="" type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN	60176-57-66	10/15/2023	10/15/2024	<input checked="" type="checkbox"/>	\$ INCLUDED	
						\$	
A	Premises Liability	60176-57-66	10/15/2023	10/15/2024	<input checked="" type="checkbox"/> occ/agg	\$ 2,000,000-4,000,000	
	Directors&Officers	60176-57-66	10/15/2023	10/15/2024	<input checked="" type="checkbox"/> occ/agg	\$ 2,000,000	

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
BAREWALLS- NO UNIT OWNERS COVERAGE-150 UNITS
Includes Building Ordinance & Law, Severability of interest included
INCLUDES EXTENDED REPLACEMENT COST ENDORSEMENT OF 150%
Management company is named additional insured (including Employee dishonesty)

CERTIFICATE HOLDER HOA PROOF OF INSURANCE CERTIFICATE REQUESTS FOR SPECIFIC UNIT OWNER/LENDER CAN BE FAXED TO 760-496-1684		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 <i>Susan Hughes</i>	
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