



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

5/28/2021

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.

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 Parker-Douglas Insurance, Inc. 400 S Colorado Blvd Ste 390 Denver CO 80246	CONTACT NAME: Gina Corsaro PHONE (A/C, No, Ext): (303)471-5646 E-MAIL ADDRESS: gina@parkerdouglas.insure PRODUCER CUSTOMER ID: 00003684	FAX (A/C, No): (303)346-6195
	INSURER(S) AFFORDING COVERAGE	
INSURED Florida Park Condominium 9145 E Kenyon Ave Ste 100 Denver CO 80237	INSURER A: Travelers of Rhode Island (TRI) NAIC # 25682	
	INSURER B: Travelers Casualty & Surety Company of NAIC # 31194	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 21/22 Property

REVISION NUMBER:

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

No inflation guard & NOT REQUIRED; Property Management Co is included under fidelity coverage; Separation of insurds is included in General Liability coverage; UNIT OWNER SHOULD CARRY H06

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	6806N199308	5/31/2021	5/31/2022	BUILDING	\$	
	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	\$
	<input type="checkbox"/> EARTHQUAKE				* Replacement Cost	<input checked="" type="checkbox"/> BLANKET BUILDING	\$ 18,943,311
	<input checked="" type="checkbox"/> WIND				* 19 Bldgs 148 Units	BLANKET PERS PROP	\$
	<input type="checkbox"/> FLOOD					BLANKET BLDG & PP	\$
<input checked="" type="checkbox"/> HAIL	5%	<input checked="" type="checkbox"/> ORD OR LAW COV A	\$ 18,943,311				
		<input checked="" type="checkbox"/> ORD OR LAW COV B&C	\$ 100000/250000				
	INLAND MARINE	TYPE OF POLICY			\$		
	CAUSES OF LOSS	POLICY NUMBER			\$		
	<input type="checkbox"/> NAMED PERILS				\$		
B	<input checked="" type="checkbox"/> CRIME	106740228	5/31/2021	5/31/2022		\$ 300,000	
	TYPE OF POLICY					\$	
A	<input checked="" type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN	6806N199308	5/31/2021	5/31/2022		\$ Included	
						\$	
						\$	
						\$	

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Associations Master Insurance Policy Certificate

Unit Owner(s):

Location:

Loan Number:

CERTIFICATE HOLDER**CANCELLATION**

FOR INFORMATIONAL PURPOSES 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.

AUTHORIZED REPRESENTATIVE

Gina Corsaro/GC