

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/05/2024

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).

	The state was a second of the						
PRODUCER		CONTACT NAME:					
	Roy Palacios Insurance Agency, Inc.	PHONE (A/C, No, Ext):(949) 582-0964	FAX (A/C, No): (949)	582-0655			
	26081 Merit Circle Suite 101	E-MAIL ADDRESS:					
	Laguna Hills, CA 92653	INSURER(S) AFFORDING COVERAGE	NAIC #				
		INSURER A :Farmers Insurance Exchange	ge	21652			
INSURED		INSURER B Federal Insurance Company	У	20281			
	Cantabria Maintenance Corporation	INSURER C Mid-Century Insurance Com	21687				
	C/O: 360 Community Management	INSURER D Philadelphia Indemnity Insurance	e Company	18058			
	10769 Woodside Ave., Suite 210 Santee, CA 92071	INSURER E :					
		INSURER F:					

COVERAGES

CERTIFICATE 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,

E	EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.								
INSE	2	TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
Α	X	CLAIMS-MADE X OCCUR			60544-89-53	03/31/2024	03/31/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000 \$75,000
								MED EXP (Any one person)	\$5,000
								PERSONAL & ADV INJURY	\$1,000,000
	GEN	N'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
	Х	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$1,000,000
		OTHER:							\$
lΑ	AUT	OMOBILE LIABILITY			60544-89-53	03/31/2024	03/31/2025	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
		ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	X	HIRED X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
									\$
В	X	UMBRELLA LIAB X OCCUR			G74475838	03/31/2024	03/31/2025	EACH OCCURRENCE	\$15,000,000
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$15,000,000
		DED X RETENTION \$ 0							\$
lc		RKERS COMPENSATION EMPLOYERS' LIABILITY			A0946-31-73	03/31/2024	03/31/2025	X PER OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE		N/A					E.L. EACH ACCIDENT	\$1,000,000
	(Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	· / /
	DÉS	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000,000
Α		uilding Property			60544-89-53	03/31/2024	03/31/2025	DED \$50,000	26,126,900
Α	A Fidelity Bond				60544-89-53	03/31/2024	03/31/2025	DED \$5,000	1,100,000
D	D Directors and Officers			PCAP003567-0618	03/31/2024	03/31/2025	DED \$1,000	1,000,000	

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

Condominium Association located in San Diego, California. 176 units.

Management Company as named insured with respects to the general liability and additional insured with respects to the fidliety and directors and officers coverage. Policy is BARE WALLS and includes 150% Extended Replacement Endorsement. Building Ordinance or Law Coverage(see policy for details).

CERTIFICATE HOLDER	CANCELLATION
CENTILICATE HOLDEN	CANCELLATION

360 Community Management

10769 Woodside Avenue #210 Santee, CA 92071 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

NIC

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