



EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

Cert ID 7471

DATE (MM/DD/YYYY)

07/12/2019

THIS EVIDENCE OF COMMERCIAL PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

PRODUCER NAME, CONTACT PERSON AND ADDRESS Prendiville Insurance Agency 24661 Del Prado, Suite 3 License #0740433 Dana Point CA 92629		PHONE (A/C, No, Ext): (949) 487-9696	COMPANY NAME AND ADDRESS Allied World National/Houston Casualty	NAIC NO:
FAX (A/C, No): (949) 487-9626		E-MAIL ADDRESS:	IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH	
CODE:	SUB CODE:		POLICY TYPE Earthquake	
AGENCY CUSTOMER ID #: 446113		LOAN NUMBER		POLICY NUMBER 5400-1670 / H-19-D4759
NAMED INSURED AND ADDRESS Cypress HOA c/o Massingham & Associates Management, Inc. 2698 Junipero Avenue, Suite 101A Signal Hill CA 90755		EFFECTIVE DATE 07/12/2019	EXPIRATION DATE 07/12/2020	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
ADDITIONAL NAMED INSURED(S)		THIS REPLACES PRIOR EVIDENCE DATED:		

PROPERTY INFORMATION (ACORD 101 may be attached if more space is required) BUILDING OR BUSINESS PERSONAL PROPERTY

LOCATION/DESCRIPTION All Units Within Cypress HOA, Cypress, CA 90630
250 Units, 56 Buildings


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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION	PERILS INSURED	BASIC	BROAD	SPECIAL	<input checked="" type="checkbox"/> Earthquake & Flood
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$ 23,000,000					DED: 20%
<input type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> RENTAL VALUE	YES NO N/A				If YES, LIMIT: Actual Loss Sustained; # of months:
BLANKET COVERAGE		X			If YES, indicate value(s) reported on property identified above: \$
TERRORISM COVERAGE		X			Attach Disclosure Notice / DEC
IS THERE A TERRORISM-SPECIFIC EXCLUSION?		X			
IS DOMESTIC TERRORISM EXCLUDED?		X			
LIMITED FUNGUS COVERAGE		X			If YES, LIMIT: DED:
FUNGUS EXCLUSION (If "YES", specify organization's form used)		X			
REPLACEMENT COST		X			
AGREED VALUE					
COINSURANCE		X			If YES, %
EQUIPMENT BREAKDOWN (If Applicable)			X		If YES, LIMIT: DED:
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg		X			If YES, LIMIT: DED:
- Demolition Costs		X			If YES, LIMIT: 5,000,000 DED:
- Incr. Cost of Construction		X			If YES, LIMIT: 5,000,000 DED:
EARTH MOVEMENT (If Applicable)		X			If YES, LIMIT: 23,000,000 DED: 20%
FLOOD (If Applicable)		X			If YES, LIMIT: 23,000,000 DED: 100,000
WIND / HAIL INCL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Subject to Different Provisions:					If YES, LIMIT: DED:
NAMED STORM INCL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Subject to Different Provisions:					If YES, LIMIT: DED:
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS					

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.

ADDITIONAL INTEREST

<input type="checkbox"/> CONTRACT OF SALE	<input type="checkbox"/> LENDER'S LOSS PAYABLE	<input type="checkbox"/> LOSS PAYEE	LENDER SERVICING AGENT NAME AND ADDRESS
<input type="checkbox"/> MORTGAGEE			
NAME AND ADDRESS Massingham & Associates Management, Inc. 2698 Junipero Avenue, Suite 101A Signal Hill CA 90755			AUTHORIZED REPRESENTATIVE 

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Special Conditions Overflow

DATE
07/12/2019

AGENCY	PHONE, (A/C, No, Ext): (949) 487-9696	APPLICANT (First Named Insured)
	Fax (A/C, No.): (949) 487-9626	Cypress HOA c/o Massingham & Associates Management, Inc. Signal Hill CA 90755
Prendiville Insurance Agency 24661 Del Prado, Suite 3 Dana Point CA 92629		
CODE:	SUB CODE:	
AGENCY CUSTOMER ID: 446113		

SPECIAL CONDITIONS / OTHER COVERAGES

This Evidence of Property Insurance is Intended to Provide Proof of Earthquake & Flood Coverage Only.

Earthquake Deductible: 20% of the Total Values at Risk at Time of Loss Per Unit of Insurance (Building) Affected, Subject to a \$25,000 Minimum per Occurrence.

Flood Deductible: \$100,000 per occurrence.

*CANCELLATION: 30 DAY NOTICE, EXCEPT 10 DAY NOTICE FOR NON-PAYMENT OF PREMIUM.