



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

1/17/2019

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.

<b>PRODUCER</b> American Benefits Inc. 4800 SW Griffith Drive Suite 300 Beaverton OR 97005	<b>CONTACT NAME:</b> Sara Eanni <b>PHONE (A/C, No, Ext):</b> (503)292-1580 <b>E-MAIL ADDRESS:</b> sara@abipdx.com <b>PRODUCER CUSTOMER ID:</b> 00004932	<b>FAX (A/C, No):</b> (503)467-4600
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> Elizabeth Lofts Condominiums Owners' Association c/o CMI 2105 SE 9th Avenue Portland OR 97214	<b>INSURER A:</b> Hartford Insurance Company	
	<b>INSURER B:</b> Continental Casualty Company	
	<b>INSURER C:</b> National Surety Corporation	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
<b>INSURER F:</b>		<b>NAIC #</b>

**COVERAGES**

CERTIFICATE NUMBER: CP1911704963

REVISION NUMBER:

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

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	52 UUN PT2129	2/1/2019	2/1/2020	BUILDING	\$
	<input type="checkbox"/> CAUSES OF LOSS				PERSONAL PROPERTY	\$
	<input type="checkbox"/> BASIC				BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD				EXTRA EXPENSE	\$
	<input checked="" type="checkbox"/> SPECIAL				RENTAL VALUE	\$
	<input checked="" type="checkbox"/> EARTHQUAKE				BLANKET BUILDING	\$ 90,160,000
	<input checked="" type="checkbox"/> WIND				BLANKET PERS PROP	\$
	<input checked="" type="checkbox"/> FLOOD				BLANKET BLDG & PP	\$
	Water Damage	10,000/unit			<input checked="" type="checkbox"/> Earthquake Limit	\$ 50,000,000
					<input checked="" type="checkbox"/> Flood Limit	\$ 10,000,000
	<input type="checkbox"/> INLAND MARINE	TYPE OF POLICY				\$
	<input type="checkbox"/> CAUSES OF LOSS					\$
	<input type="checkbox"/> NAMED PERILS	POLICY NUMBER				\$
B	<input checked="" type="checkbox"/> CRIME	618770574	2/1/2019	2/1/2020	<input checked="" type="checkbox"/> Employee Dishonesty	\$ 2,000,000
	<input type="checkbox"/> TYPE OF POLICY				<input checked="" type="checkbox"/> Computer Fraud	\$ 2,000,000
					<input checked="" type="checkbox"/> Forgery/Alteration	\$ 50,000
A	<input checked="" type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN	52 UUN PT2129	2/1/2019	2/1/2020	<input checked="" type="checkbox"/> Equipment Breakdown	\$ 90,160,000
C		SUO-000-4905-4554-1321-3	2/1/2019	2/1/2020	<input checked="" type="checkbox"/> Umbrella	\$ 25,000,000
B	Directors & Officers	618770574	2/1/2019	2/1/2020	<input checked="" type="checkbox"/> Directors & Officers	\$ 1,000,000
A	Commercial General Liability	52 UUN PT2129	2/1/2019	2/1/2020	<input checked="" type="checkbox"/> Per Occurrence Limit	\$ 1,000,000

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

**CERTIFICATE HOLDER****CANCELLATION**

EVIDENCE OF INSURANCE

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

Vern Newcomb/JESS

## COMMENTS/REMARKS

WALLS IN COVERAGE INCLUDED  
BETTERMENTS AND IMPROVEMENTS INCLUDED  
100% REPLACEMENT COST  
180 RESIDENTIAL UNITS & 15 COMMERCIAL UNITS  
THE PROPERTY MANAGEMENT COMPANY IS LISTED AS AN ADDITIONAL INSURED  
CANCELLATION NOTICES ARE SENT DIRECTLY TO THE NAMED INSURED WITH A 10 DAY NOTICE FOR  
NON-PAY AND 30 DAY NOTICE FOR ALL OTHER REASONS  
A \$10,000 PER UNIT WATER DAMAGE DEDUCTIBLE APPLIES

\*EXCESS EARTHQUAKE POLICY IS WITH LLOYD'S OF LONDON. POLICY NUMBER 36-7500135052.  
\$41,510,000 IN EXCESS OF \$50,000,000.\*

Building Ordinance:

Coverage A (Undamaged Portion of Building) - \$67,350,000 Limit / \$10,000 Ded.  
Coverage B (Demolition) & Coverage C (Increased Cost of Construction) COMBINED -  
\$10,000,000 Limit / \$10,000 Ded.